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COOPERATIVE COUNTY HEALTH WORK

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County health service, under the direction of whole-time health officers, has become an integral and important part of the public health machinery in many States. Each year it assumes a more important place in the State health programs as additional counties avail themselves of this service¹ and as those health authorities who are interested in one or another special phase of health administration realize that a county health department furnishes the best means for conducting in rural districts each special health activity as a part of a general health program.

Many requests are received by the Public Health Service, and by public health officers engaged in county health work, from physicians, county authorities, volunteer health agencies, and the public generally, for information as to this work. It is in general response to such requests that this statement has been prepared outlining the method of securing, plan of organization, cost, and activities of, a county health department. The problems, and the methods used in their solution, vary somewhat in each State, but there are certain activities common to all and certain methods which are generally applicable.

METHOD OF SECURING A COUNTY HEALTH DEPARTMENT

County authorities ordinarily are not disposed to appropriate funds for health work unless they are convinced that public sentiment in the county will approve their action. Therefore, the usual first step in securing the establishment of a county health department is to conduct a campaign of education in the county to show the advantages and economy of public expenditures for this purpose. In most communities there is a large latent sentiment favoring public health work. This sentiment should be activated and vocalized. The physicians of the county should be informed of the

¹ Number of counties or districts in the United States in which, as of January 1 of each year, the rural sections were provided with local health service under whole-time local (county or district) health officers: 1920—109; 1921—161; 1922—202; 1923—230; 1924—250; 1925—280. (Lumsden, L. L.: *Extent of Rural Health Service in the United States*. Pub. Health Rep., vol. 40, No. 19, May 8, 1925, pp. 930-941.)

project and their assistance solicited. Frequently there are volunteer health organizations which will actively support and foster the plan. Women's organizations, luncheon clubs, chambers of commerce, farmers organizations, labor unions, educational associations, and other organizations may help to secure the establishment of a health department. In other instances it may be desirable to form a health committee composed of leading citizens of the county to organize public sentiment. In any event, when a sufficient number of citizens is convinced of the desirability of having a health department, a hearing should be had before the county authorities and a personal request made for the adoption of the plan, and for the appropriation of necessary funds. The plan presented should be definite, the contemplated cost should be made known, the purposes of each item of expenditure should be stated, and the results to be expected in service rendered should be made clear.

When a campaign for a health department is started in a county, the county authorities should be apprised of the plan. It is desirable for some local organization to initiate the campaign and to request assistance, if needed, from the State health department in creating favorable sentiment. Occasionally county authorities are found who are convinced of the inherent soundness of the plan and are willing to appropriate funds without waiting for an expression of public sentiment. In such cases it is still important to inform the people of the county fully as to the functions of the health department so that public cooperation, which is essential to success, may be had by the health officer.

Although the general procedures outlined above are usually applicable, the most effective methods for each county must be determined from a knowledge of local conditions. Sometimes the presence of an epidemic will serve to emphasize the need for health service. Again, a sanitary and health survey of a county will show the need for corrective measures or will bring to light existing inefficiency of, or waste of funds by, incoordinated or part-time health service.

PLAN OF ORGANIZATION

In a county where the largest city does not exceed 50,000 population it is usually desirable in the interest of efficiency and economy to form a combined county and city health department under the administration of one health officer. Even where local conditions preclude such a combination, the county health officer should have general advisory authority over all health work in the county. Every county health officer should be required to observe and enforce all State and local health laws, ordinances, and regulations throughout his jurisdiction.

The laws and regulations governing the appointment of county health officers vary in different States. The appointing power usually is vested in the county authorities (boards of supervisors, county commissioners, etc.), or in a county board of health appointed by the county authorities. Some control by the State is or should be exercised to assure appointment on the basis of efficiency. In the absence of specific legal authority to name or to approve the appointment of the county health officer, the use or the withholding of State financial aid often serves the purpose. The position should be removed from partisan political control either on the part of the State or county, and the local authorities should be given all possible responsibility compatible with efficient service.

The county medical society's support of the project is important, and, where the laws permit, its indorsement of the person appointed as health officer should be secured.

The health officer is responsible to the county and to the State for the proper and efficient performance of his duties. He should agree to devote his entire time to the duties of his office and not to engage in private practice. Whenever possible, it is desirable to secure a health officer who has had special public health training or experience, but the personal equation of the health officer is the most important single factor in success. The entire personnel of the county health department should be appointed by and work under the direction of the health officer.

In the State health agency there should be a State director of county health service, who should be preferably the assistant State health officer, with administrative charge of the organization and maintenance of county health departments. Under the administrative supervision of the State health officer he should direct the general policies of the several special divisions of the State health department, such as child hygiene, tuberculosis, venereal disease, sanitation, etc., with respect to those counties with whole-time health departments. By such arrangement proper sequence and proper relative values may be observed in coordinating all special phases of health work into one well balanced health program best suited to the needs of the particular county. Expert assistance and advice should be available from the State and also the Federal health service in connection with special health problems, and the county health department should serve as the agency by and through which most State and Federal health activities are conducted in the county.

Except in rare instances permanent progress has not been made in county health work without financial and technical assistance from extra county sources. The United States Public Health

Service and the International Health Board have made funds and personnel available to many States with which to initiate the development and assist in the maintenance of county health departments. In a number of the States special legislative appropriations are now available for subsidizing county health departments.² The counties themselves should provide at least one-half of the budget at the outset, and a larger percentage in succeeding years.

PERSONNEL AND COST OF A COUNTY HEALTH DEPARTMENT

The cost of a county health department will vary with the area, population, and taxable resources of the county, and with the willingness of the people to provide themselves with health service.

For all except the most sparsely populated and poorest counties the minimum cost of a county health department should be at least \$10,000 a year. In the more populous counties a larger budget will be needed to secure adequate service. In general, it may be stated that an expenditure of 50 cents per capita per annum should furnish a county with reasonably adequate health service. (This does not include hospital expenses, bedside nursing, or pauper relief.) A budget of 25 cents per capita should be the minimum in any except the poorest counties.

The minimum personnel should include a full-time medical health officer, one nurse or sanitary inspector, and an office clerk. A much more efficient organization will be secured if both a nurse and sanitary inspector are provided. Larger organizations include additional nurses and inspectors, and in some instances a dentist, sanitary engineer, nutrition worker, bacteriologist with laboratory, etc.

Typical budgets may be distributed as follows:

Item	County A	County B	County C
Salary, county health officer.....	\$4,800	\$4,200	\$3,600
Salary, public health nurse.....	2,000	1,800	1,800
Salary, sanitary inspector.....	1,800	1,500	1,500
Salaries, additional nurses or inspectors.....	3,000	1,500	-----
Salary, office clerk.....	1,200	900	750
Travel expenses.....	2,400	1,800	1,800
Contingent expenses.....	800	800	550
Total annual cost.....	16,000	12,500	10,000

In addition to the above amounts, the county should provide and equip suitable quarters for the health office, preferably in the court house or in some other central location.

² In about 20 of the States such appropriations have been provided. The Public Health Service is giving assistance to about 76 counties in 19 States and the International Health Board to about 105 counties in about 23 States.

ACTIVITIES OF A COUNTY HEALTH DEPARTMENT

All of the activities outlined herein rarely can be conducted in any one county, owing to limited funds and personnel. Every activity mentioned, however, is now being conducted by some county health departments. During the first years especially, the health officer should concentrate on the most important of his problems rather than dissipate his efforts in too many directions.

The county and State health authorities should agree upon a health program to be undertaken, the general guides being (a) the relative importance and the relative preventability of the disease or group of diseases, (b) the conjectural value of those health activities not directed specifically against particular diseases, and (c) the psychological response of the people to the service.

HEALTH EDUCATION

The primary duty of the county health department is to interest and educate the people of the county in matters pertaining to the cause and prevention of communicable diseases and the possibilities for community health promotion. This is accomplished by—

1. *Public addresses*, using, where desirable, illustrations with lantern slides, charts, models, or motion pictures;
2. *Educational literature* furnished by the Public Health Service, the State health department, and other public health agencies dealing with various phases of health conservation;
3. *News articles* in the press of the county relating to the work of the health department and to general health subjects;
4. *Public health exhibits* at county and community fairs, public schools, and such other places as may be practicable;
5. *Other educational methods* to interest and inform the people in the importance of health protection.

In the execution of the above, and all other phases of health work, the health officer should enlist the support and cooperation of all available organizations and agencies.

CONTROL OF ACUTE COMMUNICABLE DISEASES

Prompt and efficient measures of communicable disease control are conducted. These include the following:

1. *Reports of cases*, and suspected cases, of notifiable diseases are secured from physicians, school authorities, and heads of households. In general, the completeness of morbidity reports will vary directly with the intelligent use made of them by the health department.
2. *Quarantine and isolation procedures* are enforced as required by law.
3. *Epidemiological investigations* are made to determine the source of disease as a basis for its elimination. Every primary case of

smallpox, diphtheria, scarlet fever, typhoid fever, poliomyelitis and cerebrospinal meningitis should be visited by the health officer *in person* whenever possible for this purpose.

4. *Home visits* are made by the nurses to give instruction to the household in the prevention of the spread of disease.

5. *Office records and a spot map* are kept to show the current and past prevalence of communicable diseases.

6. *Consultations are held with attending physicians* relative to cases of communicable disease whenever there may be difference of opinion as to the diagnosis.

7. *Free immunizations* are done for educational and demonstrational purposes in the prevention of smallpox, typhoid fever, and diphtheria. An harmonious understanding of this matter should first be had with the local medical profession and the cooperation of its members be secured.

8. *Biologics*, when distributed free by the State health department, may be handled by the county health office, or the county health officer should see that these biologics are kept under proper conditions and in sufficient quantities for the needs of the county.

LABORATORY WORK

Either State or local laboratory facilities should be provided to aid in the diagnosis of communicable diseases and to control water and milk supplies. It is especially desirable to have a laboratory in connection with the county health department when State laboratory facilities are not located so as to be available for prompt service.

VENEREAL DISEASE CONTROL

1. Educational measures for the promotion of social hygiene are conducted by all practical and usual methods.

2. The health department provides or sees to it that adequate treatment is provided for all persons infected with a venereal disease who are unable to pay a private physician for this service. Arsphe-
namine should be furnished without cost to any physician in the county for the treatment of indigent patients.

3. The health department should cooperate with the agencies primarily responsible for law enforcement and should take the initiative in mobilizing public sentiment to enact or enforce necessary legal measures.

TUBERCULOSIS CONTROL

1. An educational campaign is conducted concerning tuberculosis prevention. This is done especially in the schools and will include classes, lantern slides, moving pictures, suitable literature on the subject, instruction in personal hygiene, and other effective methods.

2. Reports are secured in so far as possible of all persons in the county who are suffering from tuberculosis.

3. Diagnostic clinics are held in cooperation with the local medical profession for the examination of tuberculosis suspects.

4. Visits are made by the nurses to the homes where cases of tuberculosis exist, to give the patient and the household such nursing instruction as will enable them to utilize to best advantage the treatment prescribed by their physician; and to advise with them concerning those sanitary precautions necessary for the prevention of the spread of the disease to others. Efforts should be made to secure sanitarium care of tuberculosis cases, especially for open cases of the disease, and if sanitarium facilities are not available, special efforts should be made to provide proper home care of patients.

5. Physical examinations of the school children will be made with the view of discovering potential and early cases, and of preventing cases by efforts designed to improve child health.

CONTROL OF SPECIAL DISEASES

Such diseases as malaria, hookworm disease, or trachoma offer special problems in many counties. In such cases appropriate additions should be made to the general health program. One of these diseases may be of sufficient importance to justify the major effort of the health department to be directed against it for considerable periods of time.

Malaria.—Prior to the institution of malaria control work it is necessary—

1. To secure knowledge of the prevalence of the disease and of malaria-carrying mosquitoes, not only for the county as a whole but for the various localities in the county (towns, townships, or school districts). This knowledge may be determined by a mosquito survey, blood and spleen examinations, history of attacks among school children, and reports from physicians.

2. To formulate a definite and practical program for malaria control both in urban and rural areas.

3. To educate the public by all available means as to the nature and extent of the problem and the measures necessary for its solution.

Malaria control procedures vary greatly, but in general they include one or more of the following:

1. Eradication of mosquitoes by drainage, use of larvicides, or fish.

2. Preventing the infection of mosquitoes and of man by screening and by prophylactic doses of quinine to man.

3. Curing cases and carriers of malaria by thorough treatment, using the standard method of quinine administration.

Hookworm disease.—Knowledge of the prevalence of this disease, gained by examinations of feces, and the education of the public form the basis for a control program. This program is directed towards—

1. Sanitary disposal of excreta in rural districts by means of sanitary privies to prevent dissemination of the disease.

2. Cure of existing cases by administration of antihelmenthics to eliminate sources of infection.

Trachoma.—Where this disease is prevalent, the cure of existing cases by surgical treatment offers the best method of eradicating it. Special assistance from the State or from the United States Public Health Service often may be secured in conducting trachoma clinics and in establishing temporary hospital facilities needed for the patients.

SANITATION

Provision of safe public water and milk supplies, and of sanitary methods of excreta and sewage disposal constitutes a primary duty of any health department, and concerted efforts to secure these sanitary essentials ordinarily will precede all other activities except immediate measures for the control of communicable diseases.

1. *Towns.*—The health department will make a sanitary survey of all towns in the county with particular reference to the source and safety of the water supply, the methods of excreta disposal, the safety of the public milk supplies, and the general sanitary conditions of the towns.

The services of the State sanitary engineer should be available for aiding the health officer in the solution of municipal water and sewage problems. Efforts are made to have any insanitary conditions corrected by education of the public and by adoption and enforcement of necessary laws or ordinances. A special effort will be made by the health officer to secure the installation of sanitary privies at those places where connection with a sewerage system is impracticable.

The provision of safe public milk supplies should be assured by the adoption and enforcement of model milk ordinances. Sanitary inspections are made of dairies, milk depots, and food establishments to see that proper sanitary conditions prevail.

2. *Schools.*—In addition to making an annual sanitary survey of all schools in the county, the health officer should make a persistent effort to induce the school boards to provide a safe supply of drinking water, sanitary toilets or water-closets, adequate light and ventilation, and such other facilities at each school as are needed properly to safeguard the health of the pupils.

3. *Rural homes.*—Improvements in the sanitary condition of rural homes will be accomplished by educating the individual householder to the need for a sanitary privy, a safe water supply, and adequate screening. Supervision and assistance should be given in the construction of rural sanitary privies.

4. *Public buildings.*—Periodic inspection should be made of public buildings and institutions in the county and recommendations made to responsible authorities for correction of any insanitary conditions.

CHILD HYGIENE

1. *Prenatal, infant, and preschool hygiene.*—Midwives are instructed and supervised; home visits are made by the nurse; and mothers' classes are held to give individual and group instruction in the diet and care of babies, the importance of prenatal medical care and hygiene, and the importance of birth registration. Baby conferences are held in various parts of the county, in cooperation with the local physicians, where examinations are made to detect physical and dietary defects and to encourage their correction. A general educational campaign is conducted in regard to the various phases of child hygiene.

2. *School hygiene.*—Physical examinations are made of all school children in the county, except where parents do not desire this service. Parents and school authorities are notified concerning defects found, and home visits are made by the nurse to urge that the family physician or dentist be consulted concerning correction of defects. For those children whose parents are unable to pay for medical treatment in the correction of defects, arrangements should be made, preferably through the local medical profession, whereby corrective treatment may be secured. Nutrition classes are held and mothers are instructed regarding the proper diet and food for children. The serving of hot lunches and milk in schools is promoted.

OTHER ACTIVITIES

1. Complete registration of vital statistics in the county is promoted or maintained by investigation of conditions, by cooperation with local registrars, physicians, and the public, and, where necessary, by law enforcement.

2. In some States the county health officer is required to perform the duties of county physician to the poor. Except in the smaller counties this is not a desirable arrangement.

3. Miscellaneous medical examinations sometimes are performed, including examinations for marriage license, for children's work certificates, for teachers' certificates, for admission to insane institutions, etc.

4. Periodic health examinations are encouraged and may be performed to some extent by the health officer.

5. Industrial hygiene problems may present themselves for solution in some counties.

6. Accident prevention and safety campaigns may be conducted or promoted by the health department.

7. Mental hygiene, a problem of great and growing importance, should be a concern of the health officer, although at present little or nothing is being done by county health departments toward its solution.

8. Records of all activities of the county health department are kept on suitable forms, and reports are made as required by State regulations. These reports include current, weekly or monthly, reports of communicable diseases to the State health department and should include monthly and annual financial, statistical, and narrative reports to the local and State authorities.

ANNUAL REPORT OF THE MARSHALL COUNTY (ALA.) HEALTH UNIT

The first annual report of the Marshall County (Ala.) Health Unit, covering the year ending February 28, 1925—the first year of its existence—indicates a high-grade demonstration in efficient, economical, well-rounded county health service and is published here because of its interest to persons concerned in the development of rural health service and to health officers generally.

The county health unit consists of four members, namely, the county health officer, Dr. Walter H. Harper, one nurse, one secretary, and one sanitary inspector.

The following is taken from Doctor Harper's report submitted to the county board of commissioners:

POPULATION

The total population of Marshall County, Ala., is 34,314, of which number 33,027 are white and 1,287 are colored. The county covers an area of 602 square miles, has 6,200 homes, and a school enrollment of 7,839.

VITAL STATISTICS

Births and deaths reported in the entire county during the year ending February 28, 1925

	Births		Deaths	
	Number	Rate per 1,000 population	Number	Rate per 1,000 population
Total.....	1 890	25.9	2 257	7.5
White.....	853	25.8	241	7.3
Colored.....	37	28.7	16	12.4

¹ Births reported by physicians, 746; by midwives, 144. Percentage of stillbirths for the year, 3.4 per cent.

² Total deaths under 1 year of age, 41 (16 per cent).

The unusually low death rate is no doubt due to incomplete death registration. Marshall County is almost entirely rural; the northern portion being mountainous and inaccessible at times. There are few undertakers in the county, and a number of deaths occur in which the bodies are buried without death certificates and burial permits being obtained. The county health unit has spent considerable time in bringing this condition to the attention of the people, and toward the end of the year some improvement was seen in the death registration. We hope soon to have a complete death registration.

Reportable diseases for the year ending February 28, 1925

Disease	Cases	Disease	Cases
Diphtheria.....	12	Scarlet fever.....	16
Gonorrhea.....	9	Smallpox.....	6
Measles.....	15	Syphilis.....	9
Pellagra.....	5	Tuberculosis (new cases).....	18
Pneumonia.....	140	Typhoid fever.....	33

LABORATORY

The laboratory service to the Marshall County Health Unit has been rendered by the State board of health branch laboratory at Anniston, Ala. The laboratory has been used by every doctor in the county. It has been of inestimable value, as will be seen by the accompanying table.

Laboratory examinations

	Positive	Negative	Total
Blood Wassermanns.....	8	71	79
Blood cultures for typhoid.....	1	7	8
Feces cultures for typhoid.....	12	63	75
Blood for Widal.....	2	11	13
Blood for malaria.....	2	5	7
Feces for hookworm.....	220	953	1,173
Sputum for tuberculosis.....	21	44	65
Throat cultures for diphtheria.....	9	33	42
Animal heads for Negri bodies.....	1	3	4

Every person who was found to have hookworm infection was treated by the health unit.

SANITATION

At the beginning of the year the county health unit, through the sanitary department, introduced ordinances in Arab, Albertville, and Boaz requiring all persons to have sanitary pit privies. These ordinances were adopted, and now the three towns are about 100 per cent sanitary. All open-back privies in the three towns were abolished as nuisances. The town of Guntersville had installed the box and can type toilets, but recently the town has passed an ordinance requiring all persons within the police jurisdiction (one mile from

corporate limits) to install the sanitary pit privies. When the health unit began its work 12 months ago there were 40 schools in the county without any sanitation at all. Since then 28 have been made completely sanitary.

Sanitary inspections of food-handling establishments have been made monthly; and as a result, wonderful improvement has been noted in the general sanitary condition of all food-handling establishments in the county.

The following is a tabulated report of the work done in sanitation by the Marshall County Health Unit:

Sanitary inspections:

Private premises.....	3, 035
Schools.....	96
Food-handling establishments.....	92

Sanitary privies installed:

Septic tanks.....	33
Pit privies (rural).....	26
Pit privies (urban).....	533

Nuisances abated (not including the 592 open-back privies abolished)..... 62

FOOD HANDLERS

The county health unit introduced ordinances in Guntersville, Albertville, and Boaz requiring all food handlers to be examined for communicable diseases by the county health officer and permitting only those who are free from communicable diseases to work in food-handling establishments. These ordinances were adopted, and 96 food handlers were examined. Of that number five were found to have syphilis and one had tuberculosis.

MALARIA CONTROL

Malaria control activities have been carried on throughout the entire year, but not on a large scale, as malaria is not very prevalent in Marshall County.

The following is a list of the malaria-control activities for the year:

Yards of new ditching, 4,372; yards of maintenance of ditches, 6,260; square feet of oiling, 16,240; picture shows, 4; literature, 1,115 copies.

CHILD HYGIENE AND SCHOOL WORK

Examination of all school children in the county was the first big item in connection with this work. Although that was not entirely completed during the first year of the health unit, it will be completed before the close of the present school term. Also, health lectures and moving picture shows were given in the schools. Notices were sent to all parents who had defective children, informing them

of the defects and urging that they be corrected. Health score charts were posted in every school. This was the first time that the school children of Marshall County had ever been examined, and so the health unit concentrated on the work of completing the examinations first and then doing the follow-up work. The following table shows only the defects corrected that have been reported to the health unit. There are a great many others that have been corrected, and the follow-up work on them will be completed during the present school term. The following table gives the work done among the school children:

Schools visited.....	61
Number of children examined.....	6,968
Number found defective.....	4,211
Corrections reported.....	31

MATERNITY AND INFANCY

As the accompanying table shows, much more time was given to individual infancy and maternity work than to group work. Several maternity and infancy clinics were started last fall, but were discontinued when cold weather came.

The nursing service has been very inadequate, because the nurse is compelled to divide her time between maternity and infancy work and child hygiene and school work.

The following table summarizes the activities during the year:

Prenatal

Cases given examination and advice.....	209
Number of home visits.....	226

Infant and preschool

Babies and children examined.....	145
Nursing visits.....	245
Clinics organized.....	4

TYPHOID FEVER CONTROL

During the summer of 1924 the health unit conducted an extensive antityphoid inoculation campaign. During that time 24,229 injections of typhoid serum were given to 8,425 persons. Of this number, 7,752 completed the treatment of three inoculations each, which is over 90 per cent. On July 8, 1924, 1,269 people were inoculated, in the court house at Albertville. The number of people completing the treatment (7,752) represents 22.6 per cent of the entire population of Marshall County. A record was kept of every person receiving the typhoid serum.

During the summer 75 feces cultures were obtained from patients and contacts. The feces cultures on contacts proved valuable, as by that means a typhoid carrier was found. This carrier is a young girl

13 years old, who gave no history of ever having typhoid fever. She was found to be responsible for five cases of typhoid fever.

The following is of interest:

Typhoid death rate per 100,000 (1919-1923).....	21.0
Typhoid death rate per 100,000 (1924).....	8.8

TUBERCULOSIS CONTROL

The county health unit has made every effort to locate and get in touch with every case of pulmonary tuberculosis in the county. To begin with, there were 18 cases reported by the medical profession of the county. The health unit started with these 18 cases and in different ways has been able to list 48 cases. These patients have been examined, advised, and given literature, but only in cooperation with their family physicians. Follow-up visits have been made from time to time on all cases.

All contacts have been instructed and advised about the disease. Considerable educational work on pulmonary tuberculosis has been carried out by means of lectures and motion picture shows.

There are 154 contacts living with the 48 cases of tuberculosis.

VENEREAL DISEASE CONTROL

Venereal disease control has been carried on by three physicians in the county who have been appointed by the State board of health to treat indigent cases of venereal diseases. These cooperative clinics are supported by the Bureau of Venereal Disease Control of the State Board of Health.

GENERAL ACTIVITIES

The following educational activities were carried out during the year:

Total number of lectures.....	53
Total attendance.....	4,295
Number of pamphlets issued.....	5,969
Number of newspaper articles.....	69
Motion-picture shows.....	15
Attendance at motion-picture shows.....	2,278

Other activities of the Marshall County Health Unit for the year were as follows:

Cases quarantined.....	53
Arrests and convictions for quarantine violations.....	3
Visits to cases by health officer.....	195
Smallpox vaccinations.....	194
Life extension examinations.....	106
Number of persons treated for hookworm infection.....	220
Number of calls to county institutions.....	9
Hours spent in interest of vital statistics.....	258
Hours spent in interest of communicable disease reporting.....	244
Hours spent in interest of maternity and infancy.....	1,596

FINANCIAL

Receipts

Marshall County.....	\$5, 000
State board of health.....	2, 500
State and Federal maternity and infancy fund.....	1, 275

8, 775

Disbursements

Salaries.....	6, 147. 51
Travel.....	1, 421. 03
Miscellaneous.....	1, 061. 68

8, 630. 22

Balance unused.....	144. 78
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WHOLE-TIME COUNTY HEALTH OFFICERS, 1925

The following directory has been compiled from data furnished as of January 1, 1925, by State health officers. Similar directories for 1922, 1923, and 1924 have been published in the Public Health Reports. The directory for 1924 was issued as Reprint No. 922.

In the questionnaire sent for the purpose of obtaining the necessary information, a "whole-time" county health officer was defined as "one who does not engage in the practice of medicine or any other business, but devotes his whole time to official duties."

Directories of State health departments have been published annually by the Public Health Service for the years 1912 to 1924, inclusive. The directory for 1924 was issued as Reprint No. 949 from the Public Health Reports.

Directories of city health officers have been published annually for the years 1916 to 1924, inclusive, the directory for 1924 being Reprint No. 930.

Directories of State and city health officers for 1925 will be published later.

County	Name of health officer	Post-office address	Official title
Alabama:			
Baldwin.....	G. C. Marlette, M. D.....	Bay Minette.....	County health officer.
Barbour.....	E. M. Moore, M. D.....	Clayton.....	Do.
Calhoun.....	G. A. Cryer, M. D.....	Anniston.....	Do.
Colbert.....	W. T. Burkett, M. D.....	Tuscumbia.....	Do.
Covington.....	W. G. Smillie, M. D.....	Andalusia.....	Do.
Dallas.....	L. T. Lee, M. D.....	Selma.....	Do.
Escambia.....	W. C. Hatchett, M. D.....	Brewton.....	Do.
Etowah.....	C. L. Murphree, M. D.....	Gadsden.....	Do.
Franklin.....	L. J. Graves, M. D.....	Russellville.....	Do.
Houston.....	T. E. Tucker, M. D.....	Dothan.....	Do.
Jefferson.....	J. D. Dowling, M. D.....	Birmingham.....	Do.
Lauderdale.....	W. D. Hubbard, M. D.....	Florence.....	Do.
Limestone.....	H. K. Gallagher, M. D.....	Athens.....	Do.
Madison.....	B. F. Austin, M. D.....	Huntsville.....	Do.
Marengo.....	F. E. Kitchens, M. D.....	Linden.....	Do.
Marshall.....	W. H. Harper, M. D.....	Guntersville.....	Do.
Mobile.....	C. A. Mohr, M. D.....	Mobile.....	Do.
Montgomery.....	J. L. Bowman, M. D.....	Montgomery.....	Do.
Morgan.....	H. C. McRee, M. D.....	Albany.....	Do.
Pike.....	W. H. Abernethy, M. D.....	Troy.....	Do.
Sumter.....	J. S. Hough, M. D.....	Livingston.....	Do.
Talladega.....	J. H. Hill, M. D.....	Talladega.....	Do.
Tuscaloosa.....	A. A. Kirk, M. D.....	Tuscaloosa.....	Do.
Walker.....	A. M. Waldrop, M. D.....	Jasper.....	Do.

County	Name of health officer	Post-office address	Official title
Arizona:			
Cochise.....	R. B. Durfee, M. D.....	Bisbee.....	County superintendent of public health.
Arkansas:			
Pulaski.....	V. T. Webb, M. D.....	Little Rock.....	County health officer.
Washington.....	J. J. Johnson, M. D.....	Foreman.....	Do.
California:			
Los Angeles.....	J. L. Pomeroy, M. D.....	Los Angeles.....	Do.
Monterey.....	R. C. Main, M. D.....	Salinas.....	Do.
Orange.....	V. G. Presson, M. D.....	Santa Ana.....	Do.
San Diego.....	A. M. Lessem, M. D.....	San Diego.....	Do.
San Francisco.....	Wm. C. Hassler, M. D.....	San Francisco.....	Do.
San Joaquin.....	J. J. Sippy, M. D.....	Stockton.....	Do.
San Luis Obispo.....	H. K. Sutherland, M. D.....	San Luis Obispo.....	Do.
Georgia:			
Baldwin.....	Sam A. Anderson, M. D.....	Milledgeville.....	Commissioner of health.
Bartow.....	H. E. Felton, M. D.....	Cartersville.....	Do.
Bibb.....	C. L. Ridley, M. D.....	Macon.....	Health officer.
Clarke.....	J. D. Applewhite, M. D.....	Athens.....	Commissioner of health.
Cobb.....	L. L. Welch, M. D.....	Marietta.....	Do.
Decatur.....	M. A. Fort, M. D.....	Bainbridge.....	Do.
De Kalb.....	W. A. Harrison, M. D.....	Decatur.....	Do.
Dougherty.....	Hugo Robinson, M. D.....	Albany.....	Do.
Floyd.....	B. V. Elmore, M. D.....	Rome.....	Do.
Glynn.....	H. L. Akridge, M. D.....	Brunswick.....	Do.
Hall.....	B. D. Blackwelder, M. D.....	Gainesville.....	Do.
Laurens.....	O. H. Cheek, M. D.....	Dublin.....	Do.
Lowndes.....	G. T. Crozier, M. D.....	Valdosta.....	Do.
Miller.....	M. A. Fort, M. D.....	Bainbridge.....	Health officer.
Mitchell.....	C. O. Rainey, M. D.....	Camilla.....	Commissioner of health.
Richmond.....	H. B. Neagle, M. D.....	Augusta.....	Do.
Seminole.....	M. A. Fort, M. D.....	Bainbridge.....	Health officer.
Sumter.....	J. W. Payne, M. D.....	Americus.....	Commissioner of health.
Thomas.....	M. E. Winchester, M. D.....	Thomasville.....	Do.
Troup.....	C. S. Kinzer, M. D.....	Lagrange.....	Do.
Walker.....	J. H. Hammond, M. D.....	La Fayette.....	Do.
Illinois:			
Cook.....	H. L. Wright, M. D., Dr. P. H.....	Chicago, 922, County Building.	County health officer.
Crawford.....	C. E. Price, M. D.....	Robinson.....	Do.
Morgan.....	T. D. Mann, M. D.....	Jacksonville.....	Do.
Sangamon.....	R. V. Brokaw, M. D.....	Springfield.....	City and county health officer.
Iowa:			
Dubuque.....	D. C. Steelsmith, M. D.....	Dubuque.....	County health officer.
Washington.....	C. W. Stewart, M. D.....	Washington.....	Do.
Kansas:			
Cherokee.....	J. C. Montgomery, M. D.....	Columbus.....	Do.
Geary.....	I. O. Church, M. D.....	Junction City.....	Do.
Lyon.....	J. S. Fulton, M. D.....	Emporia.....	Do.
Marion.....	S. M. Mallison, M. D.....	Marion.....	Do.
Ottawa.....	W. J. Lynn, M. D.....	Minneapolis.....	Do.
Sheridan.....	L. S. Steadman, M. D.....	Hoxie.....	Do.
Kentucky:			
Boyd.....	Robert D. Higgins, M. D.....	Ashland.....	Director.
Daviess.....	George W. Duvall, M. D.....	Owensboro.....	Do.
Fayette.....	J. S. Chambers, M. D.....	Lexington.....	Do.
Fulton.....	J. M. Hubbard, M. D.....	Hickman.....	Do.
Jefferson.....	Irvin Lindenberger, M. D.....	Louisville.....	Health officer.
Johnson.....	J. W. Duke, M. D.....	Paintsville.....	Director (acting).
Mason.....	V. D. Guittard, M. D.....	Maysville.....	Director.
Scott.....	Albert Steward, M. D.....	Georgetown.....	Do.
Louisiana:			
Beauregard.....	Austin F. Berr, M. D.....	De Ridder.....	Parish health officer.
Caddo.....	W. J. Sandige, M. D.....	Shreveport.....	Do.
Claiborne.....	John R. Turner, M. D.....	Homer.....	Do.
De Soto.....	P. B. Gardner, M. D.....	Mansfield.....	Director parish health unit.
Natchitoches.....	W. W. Knipmeyer, M. D.....	Natchitoches.....	Do.
Ouachita.....	John Schreiber, M. D.....	Monroe.....	Deputy health officer and director parish health unit.
St. Mary.....	Thos. B. Wilson, M. D.....	Franklin.....	Director parish health unit.
Tangipahoa.....	W. C. T. Ellis, M. D.....	Amite.....	Parish health officer.
Washington.....	F. Michael Smith, M. D.....	Franklinton.....	Director parish health unit.

¹ Parishes.

County	Name of health officer	Post-office address	Official title
Maryland:			
Allegany	C. C. McCulloch, Jr., M. D.	Cumberland	Deputy State health officer.
Baltimore	J. S. Bowen, M. D.	Towson	Do.
Calvert	I. N. King, M. D.	Barstow	Assistant deputy State health officer.
Carroll	W. C. Stone, M. D.	Westminster	Deputy State health officer.
Frederick	E. C. Kefauver, M. D.	Frederick	Assistant deputy State health officer.
Montgomery	W. T. Pratt, M. D.	Rockville	Deputy State health officer.
Massachusetts:			
Barnstable	A. P. Goff, M. D.	Hyannis	District health officer.
Minnesota:			
St. Louis	H. G. Lampson, M. D.	Duluth	County health officer.
Mississippi:			
Bolivar	R. D. Dedwylder, M. D.	Cleveland	Director county health department.
Coahoma	R. R. Kirkpatrick, M. D.	Clarksdale	Do.
Forrest	W. D. Beacham, M. D.	Hattiesburg	Do.
Hancock	C. M. Shipp, M. D.	Bay St. Louis	Do.
Harrison	D. J. Williams, M. D.	Gulfport	County health officer.
Jackson	W. E. Sharp, M. D.	Pascagoula	Director county health department.
Jones	J. M. Kittrell, M. D.	Laurel	Do.
Lee	J. B. Black, M. D., C. P. H.	Tupelo	Do.
Pearl River	W. B. Harrison, M. D.	Poplarville	Do.
Sharkey	A. K. Barrier, M. D.	Rolling Fork	Do.
Washington	A. J. Ware, M. D.	Greenville	County health officer.
Missouri:			
Dunklin	E. L. Spence, M. D.	Kennett	Do.
Gentry	E. M. Lucke, M. D.	Albany	Do.
Greene	U. F. Kerr, M. D.	Springfield	Do.
New Madrid	Wm. N. O'Bannon, M. D.	New Madrid	Do.
Nodaway	C. P. Fryer, M. D., C. P. H.	Maryville	Do.
Pettis	W. L. Bradford, M. D.	Sedalia	Do.
Polk	Gervais Smith, M. D.	Bolivar	Do.
St. Francois	Bradford Massey, M. D.	Flat River	Do.
St. Louis	Wm. F. O'Malley, M. D.	Clayton	Do.
Montana:			
Cascade	W. H. Pickett, M. D., D. P. H.	Great Falls	Do.
Lewis and Clark	Arthur Jordan, M. D.	Helena	Do.
Missoula	F. D. Pease, M. D.	Missoula	Do.
New Mexico:			
Bernalillo	J. R. Scott, M. D.	Albuquerque	Do.
Chaves	J. A. Smith, M. D.	Roswell	Do.
Colfax			Do.
Dona Ana	C. W. Gerber, M. D.	Las Cruces	Do.
Eddy	W. W. Johnston, M. D.	Carlsbad	Do.
McKinley			Do.
San Miguel			Do.
Santa Fe	H. P. Mera, M. D.	Santa Fe	Do.
Union	C. H. Douthirt, M. D.	Clayton	Do.
Valencia	G. W. Luckey, M. D.	Los Lunas	Do.
New York:			
Cattaraugus	L. D. Bristol, M. D.	Olean	District health officer.
North Carolina:			
Beaufort	J. W. Williams, M. D.	Washington	Health officer.
Bertie	J. E. Smith, M. D.	Windsor	Do.
Bladen	W. T. Ruark, M. D.	Elizabethtown	Do.
Brunswick	R. E. Broadway, M. D.	Southport	Do.
Buncombe	M. P. Moorer, M. D.	Asheville	Do.
Cabarrus	S. E. Buchanan, M. D.	Concord	Do.
Columbus	Floyd Johnson, M. D.	Whiteville	Do.
Craven	D. E. Ford, M. D.	New Bern	Do.
Cumberland	J. W. McNeill, M. D.	Fayetteville	Do.
Davidson	G. C. Gambrell, M. D.	Lexington	Do.
Durham	J. H. Epperson, Ph. D.	Durham	Do.
Edgecombe	J. S. Hooker, M. D.	Tarboro	Do.
Forsyth	J. R. Hege, M. D.	Winston-Salem	Do.
Guilford	R. M. Bine, M. D.	Greensboro	Do.
Granville	J. A. Morris, M. D.	Oxford	Do.
Halifax	E. W. Larkin, M. D.	Weldon	Do.
Henderson	J. S. Brown, M. D.	Hendersonville	Do.
Hyde	Clyde Ruff, M. D.	Swanquarter	Do.
Lenoir	R. S. McGeachy, M. D.	Kinston	Do.
Mecklenburg	W. A. McPhaul, M. D.	Charlotte	Do.
New Hanover	J. H. Hamilton, M. D.	Wilmington	Do.
Northampton	Z. P. Mitchell, M. D.	Jackson	Do.
Pamlico	D. A. Dees, M. D.	Bayboro	Do.
Pitt	C. L. Outland, M. D.	Greenville	Do.
Richmond	A. B. McCreary, M. D.	Rockingham	Do.

County	Name of health officer	Post-office address	Official title
North Carolina—Con.			
Robeson.....	E. R. Hardin, M. D.	Lumberton.....	Health officer.
Rowan.....	C. W. Armstrong, M. D.	Salisbury.....	Do.
Rutherford.....	J. C. Twitty, M. D.	Rutherfordton.....	Do.
Sampson.....	E. T. Hollingsworth, M. D.	Clinton.....	Do.
Surry.....	R. M. Lancaster, M. D.	Mount Airy.....	Do.
Vance.....	F. R. Harris, M. D.	Henderson.....	Do.
Wake.....	A. C. Bulla, M. D.	Raleigh.....	Do.
Wayne.....	L. W. Corbett, M. D.	Goldsboro.....	Do.
Wilkes.....	J. W. White, M. D.	Wilkesboro.....	Do.
Wilson.....	L. J. Smith, M. D.	Wilson.....	Do.
Ohio:			
Allen.....	J. J. Sutter, M. D.	Lima.....	District health commissioner.
Ashtabula.....	W. S. Weiss, M. D.	Jefferson.....	Do.
Athens.....	J. M. Higgins, M. D.	Athens.....	Do.
Belmont.....	F. B. Dew, M. D.	St. Clairsville.....	Do.
Butler.....	C. J. Baldridge, M. D.	Hamilton.....	Do.
Clermont.....	F. A. Ireton, M. D.	Batavia.....	Do.
Clinton.....	W. K. Ruble, M. D.	Wilmingon.....	Do.
Columbiana.....	T. T. Church, M. D.	Lisbon.....	Do.
Coshocton.....	D. M. Criswell, M. D.	Coshocton.....	Do.
Crawford.....	G. T. Wasson, M. D.	Bucyrus.....	Do.
Cuyahoga.....	Robert Lockhart, M. D.	Cleveland.....	Do.
Delaware.....	A. J. Pounds, M. D.	Delaware.....	Do.
Erie.....	F. M. Houghtaling, M. D.	Sandusky.....	Do.
Fayette.....	T. F. Myler, M. D.	Washington Court House.....	Do.
Franklin.....	C. M. Valentine, M. D.	Columbus.....	Do.
Geauga.....	G. L. Lyne, M. D.	Chardon.....	Do.
Hamilton.....	C. A. Neal, M. D.	Cincinnati.....	Do.
Hancock.....	S. F. Whisler, M. D.	Findlay.....	Do.
Hocking.....	W. G. Rhoten, M. D.	Logan.....	Do.
Huron.....	B. C. Pilkey, M. D.	Norwalk.....	Do.
Lake.....	Herbert Kenning, M. D.	Painesville.....	Do.
Lorain.....	W. A. McIntosh, M. D.	Oberlin.....	Do.
Lucas.....	F. F. DeVore, M. D.	Toledo.....	Do.
Mahoning.....	J. F. Elder, M. D.	Youngstown.....	Do.
Marion.....	N. Sittitt, M. D.	Marion.....	Do.
Meigs.....	J. N. Gilliford, M. D.	Pomeroy.....	Do.
Mercoer.....	F. E. Ayers, M. D.	Celina.....	Do.
Miami.....	P. J. Crawford, M. D.	Troy.....	Do.
Montgomery.....	H. H. Fansing, M. D.	Dayton.....	Do.
Morrow.....	R. L. Pierce, M. D.	Mount Gilead.....	Do.
Muskingum.....	J. M. O'Neal, M. D.	Zanesville.....	Do.
Paulding.....	C. E. Huston, M. D.	Paulding.....	Do.
Perry.....	F. J. Crosbie, M. D.	New Lexington.....	Do.
Richland.....	William DeKleine, M. D.	Mansfield.....	Do.
Ross.....	G. E. Robbins, M. D.	Chillicothe.....	Do.
Sandusky.....	O. H. Thomas, M. D.	Fremont.....	Do.
Scioto.....	R. W. DeCrow, M. D.	Whealersburg.....	Do.
Seneca.....	H. L. S. Hinkley, M. D.	Tiffin.....	Do.
Shelby.....	Arlington Ailes, M. D.	Sidney.....	Do.
Stark.....	C. M. Peters, M. D.	Canton.....	Do.
Summit.....	R. H. Markwith, M. D.	Akron.....	Do.
Trumbull.....	L. A. Connell, M. D.	Warren.....	Do.
Tuscarawas.....	J. Blickensderfer, M. D.	New Philadelphia.....	Do.
Union.....	H. G. Southard, M. D.	Marysville.....	Do.
Washington.....	A. G. Sturgiss, M. D.	Marietta.....	Do.
Wayne.....	C. D. Barrett, M. D.	Wooster.....	Do.
Wood.....	H. J. Powell, M. D.	Bowling Green.....	Do.
Oklahoma:			
Carter.....	R. C. Sullivan, M. D.	Ardmore.....	County superintendent of health.
Le Flore.....	W. F. Lunsford, M. D.	Poteau.....	Do.
Muskogee.....	J. D. Leonard, M. D.	Muskogee.....	Do.
Oklahoma.....	Geo. Hunter, M. D.	Oklahoma City.....	Do.
Pittsburg.....	R. L. Cochran, M. D.	McAlester.....	Do.
Oregon:			
Clackamas.....	F. W. Wallace, M. D.	Oregon City.....	County health officer.
Coos.....	G. A. Burket, M. D.	Coquille.....	Do.
Douglas.....	W. C. Belt, M. D.	Roseburg.....	Do.
Jackson.....	W. F. Holt, M. D.	Jacksonville.....	Do.
Klamath.....	G. S. Newsum, M. D.	Klamath Falls.....	Do.
South Carolina:			
Aiken.....	C. H. Farmer, M. D.	Aiken.....	Health officer.
Anderson.....	E. E. Epting, M. D.	Anderson.....	Do.
Beaufort.....	T. R. Meyer, M. D.	Beaufort.....	Do.
Charleston.....	Leon Banov, M. D.	Charleston.....	Do.
Cherokee.....	W. H. Shealy, M. D.	Gaffney.....	Do.
Colleton.....	L. W. Martin, M. D.	Walterboro.....	Do.
Darlington.....	A. B. Hooton, M. D.	Darlington.....	Do.
Dillon.....	R. G. Beachley, M. D.	Dillon.....	Do.
Fairfield.....	Roderick MacDonald, M. D.	Winnabore.....	Do.
Georgetown.....	C. M. Moore, M. D.	Georgetown.....	Do.

County	Name of health officer	Post-office address	Official title
South Carolina—Con.			
Greenville	Baylis Earle, M. D.	Greenville	Health officer.
Marion	W. L. Poole, M. D.	Marion	Do.
Newberry	H. G. Callison, M. D.	Newberry	Do.
Orangeburg	G. C. Bolin, M. D.	Orangeburg	Do.
South Dakota:			
Brown	Geo. M. Boteler, M. D.	Aberdeen	County health officer.
Pennington	D. R. Jones, M. D.	Rapid City	Superintendent county board of health.
Yankton	Thos. F. Ballard, M. D.	Yankton	Do.
Tennessee:			
Blount	K. A. Bryant, M. D.	Maryville	Field director.
Davidson	J. J. Lentz, M. D.	Nashville	County health officer.
Gibson	F. L. Roberts, M. D.	Trenton	Do.
Montgomery	F. J. Malone, M. D.	Clarksville	Field director.
Obion	J. W. Dennis, M. D.	Union City	County health officer.
Roane	J. C. Fly, M. D.	Kingston	Do.
Rutherford	H. S. Mustard, M. D.	Murfreesboro	Director.
Sevier	P. H. Muse, M. D.	Sevierville	County health officer.
Williamson	L. M. Graves, M. D.	Franklin	Do.
Texas:			
Falls	James Makins, M. D.	Marlin	Director.
Hidalgo	J. R. Mahone, M. D.	Pharr	Do.
Nueces	H. Garst, M. D.	Corpus Christi	Do.
Tarrant	F. P. Smith, M. D.	Fort Worth	Do.
Utah:			
Davis	Sumner Gleason, M. D.	Kaysville	Health officer.
Weber	H. E. Beinap, M. D.	Ogden	Do.
Virginia:			
Accomac	A. D. Knott, M. D.	Accomac	Do.
Albemarle	G. B. Young, M. D.	Charlottesville	Do.
Arlington	P. M. Chichester, M. D.	Clarendon	Do.
Augusta	H. M. Wallace, M. D.	Staunton	Do.
Brunswick	L. H. Lewis, M. D.	Lawrenceville	Do.
Carroll	James W. Smith	Hillsville	Sanitary officer.
Charlotte	L. E. Robbins	Charlotte	Do.
Chesterfield	M. D. Fuller	Petersburg	Do.
Fairfax	W. P. Caton, M. D.	Fairfax	Health officer.
Greenville	R. A. Deal	Emporia	Sanitary officer.
Halifax	Kolbe Curtice	South Boston	Health officer.
Henrico	G. H. Musgrave, M. D.	Richmond	Do.
Henry	R. M. Wilson	Martinsville	Sanitary officer.
Isle of Wight	D. B. Lepper, M. D.	Isle of Wight	Health officer.
James City	J. H. Crouch, M. D.	Williamsburg	Do.
Northampton	J. R. Horn, jr., M. D.	Eastville	Do.
Nansemond	W. H. Newcomb, M. D.	Suffolk	Do.
Prince Edward	J. E. Enders	Farmville	Sanitary officer.
Pulaski	J. L. Johnson	Pulaski	Do.
Roanoke	L. B. St. Clair	Roanoke	Do.
Smyth	J. F. Ward	Marion	Do.
Washington	M. L. Hawley	Abingdon	Do.
Wise	W. R. Culbertson, M. D.	Norton	Health officer.
Washington:			
Celan	Paul L. West, M. D.	Wenatchee	City and county health officer.
King	Geo. H. T. Sparling, M. D.	Seattle	County health officer.
Spokane	T. C. Barnhart, M. D.	Spokane	County health officer and physician.
Walla Walla	J. P. Kane, M. D.	Walla Walla	City and county health officer.
Yakima	H. H. Smith, M. D.	Yakima	Do.
West Virginia:			
Gilmer	E. O. Chimene, M. D.	Glenville	Health officer.
Hancock	Charles Koneig, M. D.	New Cumberland	Do.
Harrison	V. A. Selby, M. D.	Clarksburg	Do.
Logan	M. P. Link, M. D.	Logan	Do.
Marion	L. N. Yost, M. D.	Fairmont	Do.
Marshall	A. P. Harrison, M. D.	Moundsville	Do.
Preston	John Thames, M. D.	Kingwood	Do.
Taylor	C. C. Hedges, M. D.	Grafton	Do.
Wyoming:			
Natrona	R. J. Malott, M. D.	Casper	County health officer.

DEATH RATES IN A GROUP OF INSURED PERSONS

COMPARISON OF PRINCIPAL CAUSES OF DEATH, FEBRUARY AND MARCH, 1925
AND FIRST QUARTER OF 1923, 1924, AND 1925

The accompanying tables are taken from the Statistical Bulletin for April, 1925, published by the Metropolitan Life Insurance Co., and present the mortality experience of the industrial insurance department of the company for February and March, 1925, and for the first quarter of the years 1923, 1924, and 1925. The rates are based on a strength of approximately 16,000,000 insured persons.

The death rate of 10.3 per 1,000 for the month of March, 1925, establishes a record low rate for that month for this group of persons, and compares with 10.5 per 1,000 for March, 1924, with 12.2 for 1923, with 12.3 for 1922, and with 10.7 for 1921. Low mortality rates for several of the most important causes of death were the factors in bringing about this excellent health record; and the same factors were in operation in reducing to a new minimum the death rate for the first quarter of this year.

Death rates (annual basis) for principal causes per 100,000 lives exposed, February and March, 1925, and March and year, 1924

[Industrial department, Metropolitan Life Insurance Co.]

Cause of death	Death rate per 100,000 lives exposed ¹			
	Mar., 1925	Feb., 1925	Mar., 1924	Year 1924 ²
Total, all causes.....	1,025.6	1,007.6	1,047.4	907.5
Typhoid fever.....	2.4	2.6	2.2	4.4
Measles.....	3.4	2.1	14.3	7.2
Scarlet fever.....	6.1	4.2	4.9	4.4
Whooping cough.....	6.9	6.9	9.3	7.4
Diphtheria.....	11.5	11.6	15.7	13.2
Influenza.....	47.7	32.7	30.5	16.0
Tuberculosis (all forms).....	113.4	103.2	115.2	104.5
Tuberculosis of respiratory system.....	90.3	92.1	104.0	92.6
Cancer.....	69.9	70.7	70.3	70.4
Diabetes mellitus.....	17.9	16.7	17.0	14.9
Cerebral hemorrhage.....	58.3	61.2	60.5	60.2
Organic diseases of heart.....	146.1	145.3	139.6	123.7
Pneumonia (all forms).....	140.4	137.1	154.5	88.8
Other respiratory diseases.....	18.7	17.8	16.8	13.9
Diarrhea and enteritis.....	16.9	19.0	18.4	32.2
Bright's disease (chronic nephritis).....	76.8	83.0	77.2	65.5
Puerperal state.....	19.2	18.4	17.5	16.8
Suicides.....	7.7	7.2	6.4	7.2
Homicides.....	6.5	6.0	6.4	7.1
Other external causes (excluding suicides and homicides).....	52.5	55.3	51.6	62.7
Traumatism by automobile.....	14.0	8.1	8.9	15.7
All other causes.....	203.3	207.0	210.1	187.0

¹ All figures include infants insured under 1 year of age.

² Based on provisional estimate of lives exposed to risk in 1924.

FIRST QUARTER OF 1925

The Bulletin states:

Health conditions among the industrial populations of the United States and Canada were never so favorable during the first quarter of any year as they have been during that period of 1925. This is clearly indicated by the death rate among the more than 16,000,000 industrial policyholders of the Metropolitan Life Insurance Co., which was 9.9 per 1,000 during this period.

The improvement in 1925 as compared with the winter months of 1924, however, is confined to the white policy holders. Among the colored the mortality exceeded slightly the figure for last year.

The factors chiefly instrumental in establishing this splendid record are shown clearly in the table. The most important item is the further decline in the tuberculosis rate among both the white and colored policyholders. * * * The four principal communicable diseases of childhood likewise showed marked improvement without a single exception. Diphtheria (which causes almost as many deaths as the other three combined) dropped 31 per cent in its rate as compared with last year. Deaths from measles totaled less than one-quarter of the record for the early months of 1924. Scarlet fever and whooping cough registered substantial declines.

Other diseases for which the record is better are cancer, cerebral hemorrhage, pneumonia, puerperal conditions, and accidents.

There are, nevertheless, a few causes which show higher death rates than during the winter of 1924. The mortality from heart disease has registered an increase among both the white and colored; chronic nephritis has run slightly higher among the whites, with a considerable increase among the colored. Deaths from influenza have been much more frequent this year than last. This does not mean that the situation was in any way serious. The disease did not prevail, by and large, in virulent form. The death rate was less than one-half that for the corresponding quarter of 1923 and much lower than in 1922. Suicides have been more frequent this year than last, and more homicides have occurred among the white policyholders.

The diabetes situation is not as favorable as it was a few months ago. In the first part of 1924 there was recorded a marked drop in the diabetes death rate coincident with the more general use of insulin. This drop followed a period in which the mortality from that disease had been showing a rising tendency. Beginning with July, 1924, however, we began to register higher death rates than were recorded during the corresponding months of 1923. This has continued during most of the succeeding months. During the first quarter of 1925 there was recorded a slight increase in the diabetes death rate among whites and a considerable increase among the colored as compared with last year. It is yet too early to determine just what this reversal in the diabetes death rate means.

Death rates (annual basis) per 100,000 persons exposed, first quarter of 1923, 1924, and 1925, compared for white and colored policyholders

[Industrial department, Metropolitan Life Insurance Co.]

Cause of death	Death rate per 100,000 persons exposed					
	White			Colored		
	January-March, 1925	January-March, 1924	January-March, 1923	January-March, 1925	January-March, 1924	January-March, 1923
All causes of death.....	908.3	929.2	1,041.7	1,632.7	1,593.9	1,656.9
Typhoid fever.....	2.8	2.4	2.9	5.7	4.2	6.3
Measles.....	3.0	14.1	11.7	1.3	5.8	7.8
Scarlet fever.....	5.9	6.8	6.6	.8	.4	.7
Whooping cough.....	6.1	7.4	5.8	10.9	11.6	8.2
Diphtheria and croup.....	14.1	20.6	28.8	5.9	6.2	8.2
Influenza.....	32.4	21.8	71.8	76.8	60.6	135.6
Meningococcus meningitis.....	.8	.9	.7	1.0	1.6	1.0
Tuberculosis (all forms).....	88.5	94.2	106.3	231.8	248.0	245.6
Tuberculosis of respiratory system.....	78.0	84.1	96.3	207.0	227.8	227.0
Tuberculosis of the meninges, etc.....	4.9	5.6	3.7	7.3	6.9	5.8
Other forms of tuberculosis.....	5.6	4.5	4.3	17.4	13.4	12.8
Cancer.....	70.9	71.2	72.7	70.9	77.3	67.6
Diabetes.....	17.8	17.0	22.0	19.3	14.3	17.0
Cerebral hemorrhage; apoplexy.....	55.3	63.3	70.2	99.2	106.3	109.0
Organic diseases of the heart.....	132.9	126.8	163.8	236.4	213.1	233.0
Total respiratory diseases.....	133.5	136.0	154.9	266.6	265.2	267.2
Bronchitis.....	6.9	6.7	8.8	10.9	8.9	11.9
Bronchopneumonia.....	50.9	56.6	48.5	80.1	88.3	62.3
Pneumonia—lobar and undefined.....	66.8	63.2	86.5	157.7	155.3	178.3
Other diseases of respiratory system.....	8.9	9.6	11.2	17.8	12.7	14.8
Diarrhea and enteritis.....	17.2	19.5	5.7	23.7	15.2	8.0
Under 2 years.....	14.3	16.3	2.5	16.6	9.6	1.2
2 years and over.....	2.9	3.2	3.3	7.1	5.6	6.8
Acute nephritis.....	5.0	5.4	5.7	16.2	16.9	14.5
Chronic nephritis.....	69.1	68.0	77.4	131.9	118.3	120.9
Total puerperal state.....	16.8	17.8	20.1	26.6	29.6	22.3
Puerperal septicemia.....	6.5	7.1	7.4	12.0	12.0	8.0
Puerperal albuminuria and convulsions.....	3.4	4.1	4.3	4.4	7.8	6.1
Other diseases of puerperal state.....	6.9	6.5	8.3	10.3	9.8	8.2
Total external causes.....	65.2	65.5	64.2	104.0	107.9	102.9
Suicides.....	7.3	6.6	7.6	4.2	3.6	4.4
Homicides.....	3.2	2.5	3.2	31.9	33.4	29.6
Accidental and unspecified violence.....	54.6	56.3	53.4	68.0	70.9	69.0
Accidental drowning.....	1.6	3.3	2.3	2.1	2.2	1.2
Automobile accidents.....	11.7	11.8	10.2	9.0	9.6	10.2
All other and ill-defined causes of death.....	171.1	170.5	165.3	303.7	291.3	281.0

DEATHS DURING WEEK ENDED MAY 2, 1925

Summary of information received by telegraph from industrial insurance companies for week ended May 2, 1925, and corresponding week of 1924. (From the Weekly Health Index, May 6, 1925, issued by the Bureau of the Census, Department of Commerce)

	Week ended May 2, 1925	Corresponding week, 1924
Policies in force.....	59,640,913	55,860,937
Number of death claims.....	12,172	11,636
Death claims per 1,000 policies in force, annual rate.....	10.6	10.9

Deaths from all causes in certain large cities of the United States during the week ended May 2, 1925, infant mortality, annual death rate, and comparison with corresponding week of 1924. (From the Weekly Health Index, May 6, 1925, issued by the Bureau of the Census, Department of Commerce)

City	Week ended May 2, 1925		Annual death rate per 1,000 corresponding week, 1924	Deaths under 1 year		Infant mortality rate, week ended May 2, 1925 ¹
	Total deaths	Death rate ²		Week ended May 2, 1925	Corresponding week, 1924	
Total (64 cities).....	7,185	13.6	³ 13.8	776	⁴ 860	-----
Akron.....	45			4	6	44
Albany.....	41	17.9	13.6	0	3	0
Atlanta.....	68	15.3	19.2	6	14	-----
Baltimore.....	237	15.5	16.8	24	24	70
Birmingham.....	78	19.8	20.8	13	5	-----
Boston.....	235	15.6	16.4	30	27	79
Bridgeport.....	29			4	3	64
Buffalo.....	157	14.8	15.5	18	28	73
Cambridge.....	43	19.9	14.9	7	3	120
Camden.....	32	13.0	16.5	1	8	16
Chicago.....	725	12.6	12.8	84	96	74
Cincinnati.....	126	16.1	13.9	14	5	83
Cleveland.....	205	11.4	11.8	32	40	79
Columbus.....	59	11.2	11.5	5	4	47
Dallas.....	50	13.5	15.8	7	5	-----
Dayton.....	41	12.4	12.9	3	4	48
Denver.....	86			8	6	-----
Des Moines.....	30	10.5	10.4	1	2	17
Detroit.....	281			55	50	93
Duluth.....	26	12.3	11.1	2	2	42
Erie.....	25			1	2	20
Fall River.....	36	15.5	15.5	3	6	43
Flint.....	13			1	5	16
Fort Worth.....	32	10.9	8.1	3	1	-----
Grand Rapids.....	27	9.3	7.4	1	2	16
Houston.....	52			10	5	-----
Indianapolis.....	99	14.4	13.7	10	7	69
Jacksonville, Fla.....	32	15.9	14.2	5	3	111
Jersey City.....	69	11.4	15.0	9	14	63
Kansas City, Kans.....	33	13.9	8.6	5	2	105
Kansas City, Mo.....	85	12.1	13.9	5	9	-----
Los Angeles.....	218			21	31	58
Louisville.....	67	13.5	13.5	6	8	52
Lowell.....	42	18.8	13.1	6	4	104
Lynn.....	25	12.5	11.6	6	4	159
Memphis.....	63	18.8	25.1	6	10	-----
Milwaukee.....	120	12.5	11.1	24	23	110
Minneapolis.....	91	11.2	12.5	9	12	48
Nashville.....	46	19.3	17.7	6	3	-----
New Bedford.....	29	11.2	11.8	4	8	66
New Haven.....	39	11.4	11.0	3	3	39
New Orleans.....	137	17.2	18.5	17	18	-----
New York.....	1,578	13.5	12.5	172	184	69
Bronx Borough.....	170	9.8	9.3	9	14	31
Brooklyn Borough.....	534	12.5	11.9	65	73	68
Manhattan Borough.....	699	16.1	14.5	82	85	82
Queens Borough.....	127	11.5	11.0	13	10	65
Richmond Borough.....	48	18.7	14.8	3	2	54
Newark, N. J.....	103	11.9	14.2	8	17	36
Norfolk.....	37	11.4	9.2	1	3	18
Oakland.....	54	11.1	11.0	9	9	105
Oklahoma City.....	15			1	2	-----
Omaha.....	52	12.8	12.3	4	7	39
Paterson.....	27	9.9	12.6	6	4	101
Philadelphia.....	521	13.7	15.3	50	48	63
Pittsburgh.....	221	18.2	18.3	24	30	84
Portland, Oreg.....	65	12.0	10.7	5	8	52
Providence.....	60	12.8	17.8	5	16	40
Richmond.....	56	15.7	17.3	6	3	73
Rochester.....	79	12.4		10	-----	79
St. Louis.....	220	14.0	14.2	11	17	-----
St. Paul.....	71	15.0	14.5	6	6	51
Salt Lake City.....	29	11.6	13.0	1	7	16
San Antonio.....	41	10.8	18.5	9	18	-----

¹ Annual rate per 1,000 population.

² Deaths under 1 year per 1,000 births—an annual rate based on deaths under 1 year for the week and estimated births for 1924. Cities left blank are not in the registration area for births.

³ Data for 62 cities.

⁴ Deaths for week ended Friday, May 1, 1925.

Deaths from all causes in certain large cities of the United States during the week ended May 2, 1925, infant mortality, annual death rate, and comparison with corresponding week of 1924. (From the Weekly Health Index, May 6, 1925, issued by the Bureau of the Census, Department of Commerce)—Continued

City	Week ended May 2, 1925		Annual death rate per 1,000 corresponding week, 1924	Deaths under 1 year		Infant mortality rate, week ended May 2, 1925
	Total deaths	Death rate		Week ended May 2, 1925	Corresponding week, 1924	
San Francisco.....	151	14.1	12.6	9	7	52
Schenectady.....	17	8.7	8.8	5	0	141
Seattle.....	91			5	5	51
Somerville.....	15	7.7	13.5	0	1	0
Spokane.....	25			0	3	0
Springfield, Mass.....	38	13.0	11.9	6	3	89
Syracuse.....	51	13.9	16.9	3	10	38
Tacoma.....	29	14.5	14.2	2	6	48
Toledo.....	66	12.0	13.2	8	12	72
Trenton.....	32	12.6	16.9	1	2	16
Utica.....	37	18.0		9		185
Washington, D. C.....	141	14.8	16.0	13	12	73
Waterbury.....	16			3	1	66
Wilmington, Del.....	27	11.5	10.0	2	7	46
Worcester.....	62	16.3	11.2	5	7	58
Yonkers.....	22	10.3	10.5	0	4	0
Youngstown.....	88	18.9	13.4	11	5	139

PREVALENCE OF DISEASE

No health department, State or local, can effectively prevent or control disease without knowledge of when, where, and under what conditions cases are occurring

UNITED STATES

CURRENT WEEKLY STATE REPORTS

These reports are preliminary, and the figures are subject to change when later returns are received by the State health officers

Reports for Week Ended May 9, 1925

ALABAMA		CALIFORNIA	
	Cases		Cases
Cerebrospinal meningitis.....	1	Cerebrospinal meningitis:	
Chicken pox.....	34	Kings County.....	1
Diphtheria.....	6	San Francisco.....	1
Dysentery.....	56	Taft.....	1
Influenza.....	127	Diphtheria.....	94
Malaria.....	47	Influenza.....	37
Measles.....	14	Jaundice (epidemic)—Tulare County.....	1
Mumps.....	28	Leprosy—Los Angeles.....	1
Ophthalmia neonatorum.....	1	Measles.....	54
Pellagra.....	22	Poliomyelitis:	
Pneumonia.....	68	Long Beach.....	1
Poliomyelitis.....	1	Modesto.....	1
Scarlet fever.....	27	Oakland.....	1
Smallpox.....	105	Rocky Mountain spotted fever—Lassen	
Tetanus.....	2	County.....	1
Trachoma.....	2	Scarlet fever.....	144
Tuberculosis.....	130	Smallpox:	
Typhoid fever.....	15	Los Angeles.....	27
Whooping cough.....	34	Oakland.....	17
		San Diego.....	18
		Scattering.....	70
		Typhoid fever.....	5
ARIZONA		COLORADO	
	Cases	(Exclusive of Denver)	Cases
Chicken pox.....	3	Chicken pox.....	27
Measles.....	27	Diphtheria.....	15
Mumps.....	3	Measles.....	4
Scarlet fever.....	5	Mumps.....	12
Tuberculosis.....	4	Pneumonia.....	12
Typhoid fever.....	1	Scarlet fever.....	8
Whooping cough.....	13	Tuberculosis.....	34
		Typhoid fever.....	2
		Vincent's angina.....	1
		Whooping cough.....	3
ARKANSAS		CONNECTICUT	
	Cases		Cases
Chicken pox.....	12	Cerebrospinal meningitis.....	2
Diphtheria.....	3	Chicken pox.....	41
Hookworm disease.....	2	Conjunctivitis (infectious).....	24
Influenza.....	40	Diphtheria.....	19
Malaria.....	36	German measles.....	30
Measles.....	37	Influenza.....	7
Mumps.....	20		
Pellagra.....	24		
Scarlet fever.....	3		
Smallpox.....	12		
Trachoma.....	3		
Tuberculosis.....	9		
Typhoid fever.....	5		
Whooping cough.....	6		

CONNECTICUT—continued

	Cases
Lethargic encephalitis.....	2
Measles.....	116
Mumps.....	9
Paratyphoid fever.....	4
Pneumonia (all forms).....	45
Scarlet fever.....	96
Tuberculosis (all forms).....	18
Typhoid fever.....	4
Whooping cough.....	118

DELAWARE

Diphtheria.....	4
Measles.....	3
Scarlet fever.....	7
Tuberculosis.....	1
Typhoid fever.....	1

FLORIDA

Chicken pox.....	12
Diphtheria.....	5
Malaria.....	9
Mumps.....	23
Pneumonia.....	1
Polio-myelitis.....	2
Scarlet fever.....	4
Smallpox.....	6
Tuberculosis.....	14
Typhoid fever.....	15
Whooping cough.....	1

GEORGIA

Cerebrospinal meningitis.....	1
Chicken pox.....	44
Conjunctivitis.....	2
Diphtheria.....	5
Dysentery.....	53
German measles.....	1
Hookworm disease.....	6
Influenza.....	110
Malaria.....	33
Measles.....	21
Mumps.....	69
Peilagra.....	15
Pneumonia.....	52
Scarlet fever.....	6
Septic sore throat.....	7
Smallpox.....	20
Tuberculosis.....	28
Typhoid fever.....	19
Whooping cough.....	54

ILLINOIS

Cerebrospinal meningitis:	
Cook County.....	4
La Salle County.....	1
Diphtheria:	
Cook County.....	65
Scattering.....	28
Influenza.....	87
Lethargic encephalitis:	
Coles County.....	1
Fulton County.....	2
Measles.....	1,552
Pneumonia.....	352

ILLINOIS—continued

Scarlet fever:	Cases
Cook County.....	235
Kane County.....	13
McLean County.....	15
Peoria County.....	12
Scattering.....	102
Smallpox.....	32
Tuberculosis.....	309
Typhoid fever.....	17
Whooping cough.....	301

INDIANA

Chicken pox.....	58
Diphtheria.....	14
Influenza.....	27
Measles.....	125
Mumps.....	3
Pneumonia.....	6
Polio-myelitis.....	1
Scarlet fever.....	195
Smallpox.....	97
Tuberculosis.....	47
Typhoid fever.....	10
Whooping cough.....	63

IOWA

Diphtheria.....	11
Scarlet fever.....	23
Smallpox.....	8

KANSAS

Chicken pox.....	69
Diphtheria.....	11
German measles.....	6
Influenza.....	17
Measles.....	6
Mumps.....	158
Pneumonia.....	21
Scarlet fever.....	72
Tuberculosis.....	59
Typhoid fever.....	1
Whooping cough.....	45

LOUISIANA

Diphtheria.....	11
Influenza.....	74
Leprosy.....	1
Malaria.....	14
Pneumonia.....	59
Scarlet fever.....	14
Smallpox.....	7
Tuberculosis.....	45
Typhoid fever.....	38
Whooping cough.....	19

MAINE

Chicken pox.....	10
Diphtheria.....	2
German measles.....	3
Influenza.....	178
Measles.....	3
Mumps.....	68
Pneumonia.....	7
Scarlet fever.....	10
Septic sore throat.....	3
Tuberculosis.....	5
Typhoid fever.....	4
Whooping cough.....	1

MARYLAND ¹		MISSOURI	
	Cases	(Exclusive of Kansas City)	Cases
Cerebrospinal meningitis.....	1	Chicken pox.....	55
Chicken pox.....	121	Diphtheria.....	86
Diphtheria.....	18	Influenza.....	8
German measles.....	2	Malaria.....	19
Influenza.....	27	Measles.....	20
Lethargic encephalitis.....	1	Mumps.....	84
Malaria.....	1	Pneumonia.....	11
Measles.....	41	Scarlet fever.....	151
Mumps.....	78	Septic sore throat.....	4
Pneumonia (all forms).....	82	Smallpox.....	11
Poliomyelitis.....	1	Tetanus.....	2
Scarlet fever.....	42	Trachoma.....	89
Septic sore throat.....	1	Tuberculosis.....	68
Smallpox.....	3	Typhoid fever.....	5
Tetanus.....	1	Whooping cough.....	27
Tuberculosis.....	51		
Typhoid fever.....	2		
Vincent's angina.....	2		
Whooping cough.....	103		
MASSACHUSETTS		MONTANA	
Cerebrospinal meningitis.....	5	Chicken pox.....	7
Chicken pox.....	133	Diphtheria.....	6
Conjunctivitis (suppurative).....	12	German measles.....	60
Diphtheria.....	76	Measles.....	22
German measles.....	247	Mumps.....	9
Hook worm disease.....	1	Rocky Mountain spotted fever:	
Influenza.....	66	Miles City.....	1
Lethargic encephalitis.....	5	Missoula R. F. D.....	1
Measles.....	1,101	Rosebud.....	1
Mumps.....	106	Thurmond.....	1
Ophthalmia neonatorum.....	16	Scarlet fever.....	38
Pneumonia (lobar).....	119	Septic sore throat.....	1
Poliomyelitis.....	1	Smallpox.....	16
Scarlet fever.....	240	Tuberculosis.....	3
Septic sore throat.....	5	Whooping cough.....	7
Smallpox.....	1		
Trachoma.....	2		
Tuberculosis (all forms).....	137		
Typhoid fever.....	3		
Whooping cough.....	176		
MICHIGAN		NEW JERSEY	
Diphtheria.....	64	Cerebrospinal meningitis.....	1
Measles.....	457	Chicken pox.....	147
Pneumonia.....	143	Diphtheria.....	78
Scarlet fever.....	323	Influenza.....	7
Smallpox.....	12	Measles.....	529
Tuberculosis.....	52	Pneumonia.....	122
Typhoid fever.....	6	Poliomyelitis.....	2
Whooping cough.....	173	Scarlet fever.....	249
		Smallpox.....	12
		Typhoid fever.....	7
		Whooping cough.....	222
MINNESOTA		NEW MEXICO	
Chicken pox.....	86	Chicken pox.....	5
Diphtheria.....	73	Diphtheria.....	1
Influenza.....	5	Measles.....	16
Measles.....	35	Mumps.....	12
Pneumonia.....	4	Pneumonia.....	1
Scarlet fever.....	217	Scarlet fever.....	6
Smallpox.....	15	Trachoma.....	1
Tuberculosis.....	47	Tuberculosis.....	9
Typhoid fever.....	2	Whooping cough.....	9
Whooping cough.....	30		
MISSISSIPPI		NEW YORK	
Diphtheria.....	5	(Exclusive of New York City)	
Scarlet fever.....	2	Cerebrospinal meningitis.....	2
Smallpox.....	18	Diphtheria.....	129
Typhoid fever.....	27	Influenza.....	64
		Lethargic encephalitis.....	4
		Measles.....	715
		Pneumonia.....	324
		Poliomyelitis.....	2
		Scarlet fever.....	329
		Smallpox.....	4
		Typhoid fever.....	12
		Whooping cough.....	231

¹ Week ended Friday.

NORTH CAROLINA		TEXAS—continued	
	Cases		Cases
Cerebrospinal meningitis.....	1	Smallpox.....	53
Chicken pox.....	64	Trachoma.....	2
Diphtheria.....	15	Tuberculosis.....	14
German measles.....	3	Typhoid fever.....	4
Lethargic encephalitis.....	1	Whooping cough.....	48
Measles.....	19		
Scarlet fever.....	16	VIRGINIA	
Septic sore throat.....	1	Smallpox:	
Smallpox.....	70	Grayson County.....	2
Typhoid fever.....	6	Isle of Wight County.....	1
Whooping cough.....	85	Nansemond County.....	1
		Petersburg.....	1
OKLAHOMA		WASHINGTON	
(Exclusive of Oklahoma City and Tulsa)			
Chicken pox.....	7	Chicken pox.....	87
Diphtheria.....	8	Diphtheria.....	22
Influenza.....	90	German measles.....	38
Scarlet fever.....	10	Lethargic encephalitis—Chelan County.....	1
Smallpox.....	9	Measles.....	2
Typhoid fever.....	4	Mumps.....	120
Whooping cough.....	9	Pneumonia.....	1
		Rocky Mountain spotted fever—Lincoln	
OREGON		County.....	1
Cerebrospinal meningitis.....	1	Scarlet fever.....	44
Chicken pox.....	34	Smallpox.....	60
Diphtheria:		Tuberculosis.....	47
Portland.....	16	Typhoid fever.....	3
Scattering.....	9	Whooping cough.....	127
Influenza.....	24		
Measles.....	3	WEST VIRGINIA	
Mumps.....	19	Diphtheria.....	4
Pneumonia.....	11	Scarlet fever.....	130
Scarlet fever:		Smallpox.....	12
Portland.....	10	Typhoid fever.....	5
Clackamas County.....	8		
Scattering.....	21	WISCONSIN	
Smallpox.....	12	Milwaukee:	
Tuberculosis.....	19	Chicken pox.....	42
Typhoid fever.....	2	Diphtheria.....	10
Whooping cough.....	23	German measles.....	134
		Influenza.....	1
SOUTH DAKOTA		Measles.....	241
Chicken pox.....	2	Mumps.....	82
Diphtheria.....	6	Ophthalmia neonatorum.....	1
Influenza.....	5	Pneumonia.....	23
Measles.....	1	Scarlet fever.....	21
Pneumonia.....	18	Smallpox.....	31
Scarlet fever.....	47	Tuberculosis.....	26
Smallpox.....	5	Whooping cough.....	22
		Scattering:	
TEXAS		Cerebrospinal meningitis.....	1
Cerebrospinal meningitis.....	2	Chicken pox.....	96
Chicken pox.....	108	Diphtheria.....	16
Diphtheria.....	23	German measles.....	332
Dysentery (epidemic).....	16	Influenza.....	299
Influenza.....	59	Measles.....	184
Leprosy.....	2	Mumps.....	199
Measles.....	53	Ophthalmia neonatorum.....	2
Mumps.....	103	Pneumonia.....	27
Paratyphoid fever.....	1	Scarlet fever.....	104
Pellagra.....	15	Smallpox.....	13
Pneumonia.....	18	Tuberculosis.....	21
Scarlet fever.....	35	Typhoid fever.....	2
		Whooping cough.....	87

¹ Deaths.

Reports for Week Ended May 2, 1925

DISTRICT OF COLUMBIA		NEBRASKA	
	Cases		Cases
Chicken pox.....	21	Chicken pox.....	27
Diphtheria.....	11	Diphtheria.....	8
Influenza.....	1	Influenza.....	5
Measles.....	55	Measles.....	3
Pneumonia.....	38	Mumps.....	24
Scarlet fever.....	21	Scarlet fever.....	11
Smallpox.....	2	Smallpox.....	35
Tuberculosis.....	34	Tuberculosis.....	4
Typhoid fever.....	3	Whooping cough.....	9
Whooping cough.....	23		
FLORIDA		NORTH DAKOTA	
Cerebrospinal meningitis.....	1	Chicken pox.....	7
Chicken pox.....	21	Diphtheria.....	4
Diphtheria.....	9	German measles.....	3
Influenza.....	3	Influenza.....	4
Malaria.....	8	Measles.....	2
Measles.....	4	Mumps.....	10
Mumps.....	81	Pneumonia.....	8
Pneumonia.....	4	Poliomyelitis.....	1
Scarlet fever.....	5	Scarlet fever.....	50
Smallpox.....	14	Smallpox.....	5
Tetanus.....	1	Tuberculosis.....	2
Tuberculosis.....	29	Whooping cough.....	28
Typhoid fever.....	11		
Whooping cough.....	7		

SUMMARY OF MONTHLY REPORTS FROM STATES ¹

The following summary of monthly State reports is published weekly and covers only those States from which reports are received during the current week.

State	Cerebrospinal meningitis	Diphtheria	Influenza	Malaria	Measles	Pellagra	Poliomyelitis	Scarlet fever	Smallpox	Typhoid fever
<i>February, 1925</i>										
Iowa.....	1	81			11			187	90	3
<i>March, 1925</i>										
District of Columbia.....	1	50	4		124	0	1	132	7	6
Georgia.....		64	4,777	95	113	19		25	48	21
Hawaii.....	3	29	149		122			4		7
Illinois.....	8	439	763		4,615		1	2,384	220	62
Minnesota.....	4	313	8		176		3	1,104	117	26
New York.....	20	1,402	1,177	3	2,640		10	3,155	34	95
<i>April, 1925</i>										
Arizona.....		14	57		171			36	5	2
Connecticut.....	4	138	71		780		3	480	2	11
District of Columbia.....	1	31	7		194	0	1	106	26	4
Michigan.....		307	70		1,039	1	4	1,605	93	38
North Dakota.....		19	23		16		1	136	33	1

¹ The monthly reports published in Public Health Reports for March 27, 1925, page 618, stated as for January, 1925, were summaries of February reports.

**Number of Cases of Certain Communicable Diseases Reported for the Month
of February, 1925, by State Health Officers**

State	Chick- en pox	Diph- theria	Mea- sles	Mumps	Scarlet fever	Small- pox	Tuber- culosis	Ty- phoid fever	Whoop- ing cough
Alabama.....	211	60	196	304	82	884	176	47	140
Arizona.....	36	21	185	77	35	22	79	7	8
Arkansas.....	182	50	110	195	89	77	136	31	55
California.....	1,662	542	186	824	618	704	804	27	721
Colorado.....	320	97	19	467	174	1	131	11	30
Connecticut.....	349	202	275	170	725		113	14	197
Delaware.....	13	10	2	15	30		144	6	6
District of Columbia.....	113	83	40		148	3	124	6	44
Florida.....	18	34	12	103	15	8	72	41	21
Georgia.....	202	70	12	328	34	61	139	41	144
Idaho.....		23			31			7	
Illinois.....	1,383	457	2,664	1,375	2,099	298	1,182	71	1,048
Indiana.....		174			892			20	
Iowa ¹									
Kansas.....	565	191	32	1,767	468	30	154	11	102
Kentucky ¹									
Louisiana.....	61	94	9	1	62	110	102	75	25
Maine.....	196	23	19	669	75		58	12	32
Maryland.....	347	164	262	268	445		219	27	405
Massachusetts.....	931	497	2,204	453	1,462		598	33	602
Michigan.....	689	299	692	339	1,366	62	535	31	440
Minnesota.....	543	395	134		998		201	29	132
Mississippi.....	1,180	57	417	2,429	30	244	287	126	633
Missouri.....	372	325	63	316	1,557	94	246	9	121
Montana.....	70	32	107	60	122	62	62	7	49
Nebreska.....		41			112			11	
New Hampshire ¹									
New Jersey.....	700	410	614		1,281	19	456	26	886
New Mexico.....	82	29	65	49	18	1	56	5	8
New York.....	2,055	1,220	1,577	1,358	2,870	54	1,424	147	1,395
North Carolina.....	640	140	96		124	329		4	345
North Dakota.....	143	64	4	60	236	15	7	6	49
Ohio.....	1,437	421	560	748	2,136	550	606	49	547
Oklahoma.....	192	104	42	89	155	179	181	50	158
Oregon.....	102	101	17	75	115	114	68	15	38
Pennsylvania.....	2,199	930	3,195	2,852	2,878	25	536	69	979
Rhode Island.....		73			140			1	
South Carolina.....	23	235	4	92	7	79	9	7	25
South Dakota.....	61	25	6	2	188	40	7	7	17
Tennessee.....	454	78	231	3	188	485	218	47	193
Texas ¹									
Utah.....	473	39	39	77	62	18	110	1	232
Vermont.....	252	17	29	322	75		115	3	142
Virginia.....	728	152	507		195	22	1226	27	894
Washington.....	535	211	39	662	201	262	126	20	155
West Virginia.....	190	92	149		133	123	42	92	189
Wisconsin.....	913	165	1,886	1,142	661	217	134	8	402
Wyoming.....	43	12	8	27	30	5	1	8	

¹ Pulmonary.² Reports not received at time of going to press.³ Reports received weekly.⁴ Reports received annually.

Case Rates per 1,000 Population (Annual Basis) for the Month of February, 1925

State	Chicken pox	Diph- theria	Measles	Mumps	Scarlet fever	Small- pox	Tuber- culosis	Ty- phoid fever	Whoop- ing cough
Alabama	1.11	0.32	1.04	1.61	0.43	4.67	0.93	0.25	0.74
Arizona	1.15	.67	5.92	2.46	1.12	.70	2.53	.22	.25
Arkansas	1.28	.35	.77	1.37	.63	.54	1.25	.22	.39
California	5.39	1.76	.60	2.67	2.00	2.28	2.61	.09	2.34
Colorado	4.09	1.24	.24	5.97	2.23	.01	1.68	.14	.38
Connecticut	2.97	1.72	2.34	1.45	6.17	-----	.96	.12	1.68
Delaware	.72	.56	.11	.83	1.67	-----	1.44	.33	.33
District of Columbia	2.96	2.17	1.05	-----	3.87	.08	3.25	.16	1.15
Florida	.22	.41	.14	1.23	.18	.10	.86	.49	.25
Georgia	.86	.30	.05	1.40	.14	.26	1.59	.17	.61
Idaho	-----	.61	-----	-----	.82	-----	-----	.19	-----
Illinois	2.59	.86	4.99	2.67	3.93	.56	2.21	.13	1.96
Indiana	-----	.74	-----	-----	3.90	-----	-----	.09	-----
Iowa ¹	-----	-----	-----	-----	-----	-----	-----	-----	-----
Kansas	4.06	1.37	.23	12.70	3.36	.22	1.11	.06	.73
Kentucky ¹	-----	-----	-----	-----	-----	-----	-----	-----	-----
Louisiana	.42	.65	.06	.01	.43	.76	1.71	.52	.17
Maine	3.26	.38	.32	11.14	1.25	-----	.97	.20	.53
Maryland	2.94	1.39	2.22	2.27	3.77	-----	1.86	.23	3.43
Massachusetts	2.94	1.57	6.96	1.43	4.62	-----	1.89	.10	1.90
Michigan	2.16	.94	2.17	1.06	4.29	.19	1.68	.10	1.38
Minnesota	2.76	2.01	.68	-----	5.07	1.02	.85	.15	.67
Mississippi	8.59	.41	3.04	17.68	.22	1.78	2.09	.92	4.61
Missouri	1.40	1.22	.24	1.19	8.85	.35	.92	.03	.45
Montana	1.41	.64	2.16	1.21	2.46	1.25	1.25	.14	.99
Nebraska	-----	.39	-----	-----	1.08	-----	-----	.11	-----
Nevada	-----	-----	-----	-----	-----	-----	-----	-----	-----
New Hampshire ¹	-----	-----	-----	-----	-----	-----	-----	-----	-----
New Jersey	2.60	1.52	2.28	-----	4.76	.07	1.70	.10	3.29
New Mexico	2.82	1.00	2.24	1.60	.62	.03	1.93	.17	.28
New York	2.41	1.43	1.85	1.59	3.37	.06	1.67	.17	1.64
North Carolina	3.02	.66	.45	-----	.59	-----	1.55	.02	1.63
North Dakota	2.72	1.22	.08	1.14	4.48	.28	.13	.11	.93
Ohio	2.96	.87	1.15	1.54	4.40	1.13	1.25	.10	1.13
Oklahoma	1.12	.61	.24	.52	.90	1.04	1.05	.29	.92
Oregon	1.57	1.56	.26	1.16	1.77	1.76	1.05	.23	.59
Pennsylvania	3.08	1.30	4.47	3.90	4.03	.03	.75	.10	1.37
Rhode Island	-----	1.49	-----	-----	2.85	-----	-----	.02	-----
South Carolina	.17	1.72	.03	.67	.05	.58	.07	.05	.18
South Dakota	1.19	.49	.12	.04	3.68	.78	.14	.14	.33
Tennessee	2.44	.42	1.24	.02	1.01	2.61	1.17	.25	1.04
Texas ¹	-----	-----	-----	-----	-----	-----	-----	-----	-----
Utah	12.52	1.03	1.03	2.04	1.64	.48	1.26	.03	6.14
Vermont	9.32	.63	1.07	11.91	2.77	-----	1.55	.11	5.25
Virginia	3.87	.81	2.70	-----	1.04	.12	1.20	.14	4.76
Washington	4.72	1.86	.34	5.84	1.77	2.31	1.11	.18	1.37
West Virginia	1.55	.75	1.21	-----	1.08	1.00	.34	.75	1.54
Wisconsin	4.25	.77	8.78	5.31	3.98	1.01	.62	.04	1.87
Wyoming	2.33	.71	.47	1.59	1.76	.29	.06	.47	-----

¹ Pulmonary.² Reports not received at time of going to press.³ Reports received weekly.⁴ Reports received annually.

PLAGUE-ERADICATIVE MEASURES IN THE UNITED STATES

The following items were taken from the reports of plague-eradica-
tive measures from the cities named for the week ended April 25, 1925:

Los Angeles, Calif.

Week ended Apr. 25, 1925:

Number of rats examined	4,903
Number of rats found to be plague infected	3
Number of squirrels examined	1,304
Number of squirrels found to be plague infected	0

Totals, Nov. 5, 1924, to Apr. 25, 1925:

Number of rats examined	90,874
Number of rats found to be plague infected	180
Number of squirrels examined	9,922
Number of squirrels found to be plague infected	9

Date of discovery of last plague-infected rodent, Apr. 28, 1925.

Date of last human case, Jan. 15, 1925.

Oakland, Calif.

(Including other East Bay communities)

Week ended Apr. 25, 1925:

Number of rats trapped..... 2,399

Number of rats found to be plague infected..... 0

Totals, Jan. 1 to Apr. 25, 1925:

Number of rats trapped..... 40,293

Number of rats found to be plague infected..... 21

Date of discovery of last plague-infected rat, Mar. 4, 1925.

Date of last human case, Sept. 10, 1919.

New Orleans, La.

Week ended Apr. 25, 1925:

Number of vessels inspected..... 300

Number of inspections made..... 920

Number of vessels fumigated with cyanide gas..... 31

Number of rodents examined for plague..... 5,381

Number of rodents found to be plague infected..... 0

Totals, Dec. 5, 1924, to Apr. 25, 1925:

Number of rodents examined for plague..... 85,619

Number of rodents found to be plague infected..... 12

Date of discovery of last plague-infected rat, Jan. 17, 1925.

Date of last human case occurring in New Orleans, Aug. 20, 1920.

GENERAL CURRENT SUMMARY AND WEEKLY REPORTS FROM CITIES

Diphtheria.—For the week ended April 25, 1925, 35 States reported 1,212 cases of diphtheria. For the week ended April 26, 1924, the same States reported 1,597 cases of this disease. One hundred cities, situated in all parts of the country and having an aggregate population of more than 28,700,000, reported 893 cases of diphtheria for the week ended April 25, 1925. Last year, for the corresponding week, they reported 984 cases. The estimated expectancy for these cities was 931 cases. The estimated expectancy is based on the experience of the last nine years, excluding epidemics.

Measles.—Thirty-two States reported 5,315 cases of measles for the week ended April 25, 1925, and 13,546 cases of this disease for the week ended April 26, 1924. One hundred cities reported 3,558 cases of measles for the week this year, and 5,171 cases last year.

Scarlet fever.—Scarlet fever was reported for the week as follows: 34 States—this year, 3,293 cases; last year, 3,372; 100 cities—this year, 1,980; last year, 1,522; estimated expectancy, 1,009 cases.

Smallpox.—For the week ended April 25, 1925, 35 States reported 909 cases of smallpox. Last year, for the corresponding week, they reported 1,427 cases of smallpox. One hundred cities reported smallpox for the week as follows: 1925, 342 cases; 1924, 568 cases; estimated expectancy, 103 cases. These cities reported 23 deaths from smallpox for the week this year.

Typhoid fever.—Two hundred and forty-four cases of typhoid fever were reported for the week ended April 25, 1925, by 34 States. For the corresponding week of 1924 the same States reported 184 cases. One hundred cities reported 90 cases of typhoid fever for the week this year and 64 cases for the corresponding week last year. The estimated expectancy for these cities was 54 cases.

Influenza and pneumonia.—Deaths from influenza and pneumonia (combined) were reported for the week by 100 cities as follows: 1925, 1,260 deaths; 1924, 1,024 deaths.

City reports for week ended April 25, 1925

The "estimated expectancy" given for diphtheria, poliomyelitis, scarlet fever, smallpox, and typhoid fever is the result of an attempt to ascertain from previous occurrence how many cases of the disease under consideration may be expected to occur during a certain week in the absence of epidemics. It is based on reports to the Public Health Service during the past nine years. It is in most instances the median number of cases reported in the corresponding week of the preceding years. When the reports include several epidemics, or when for other reasons the median is unsatisfactory, the epidemic periods are excluded and the estimated expectancy is the mean number of cases reported for the week during nonepidemic years.

If reports have not been received for the full nine years, data are used for as many years as possible, but no year earlier than 1915 is included. In obtaining the estimated expectancy, the figures are smoothed when necessary to avoid abrupt deviations from the usual trend. For some of the diseases given in the table the available data were not sufficient to make it practicable to compute the estimated expectancy.

Division, State, and city	Population July 1, 1923, estimated	Chicken pox, cases reported	Diphtheria		Influenza		Measles, cases reported	Mumps, cases reported	Pneumonia, deaths reported
			Cases, estimated expectancy	Cases reported	Cases reported	Deaths reported			
NEW ENGLAND									
Maine:									
Portland.....	73, 129	6	1	0	1	1	1	39	3
New Hampshire:									
Concord.....	22, 468	0	0	0	0	0	0	0	1
Manchester.....	81, 383	0	2	0	0	0	5	0	1
Vermont:									
Barre.....	¹ 10, 008	1	0	0	0	0	1	3	0
Burlington.....	23, 613	3	1	0	0	0	16	17	0
Massachusetts:									
Boston.....	770, 400	-----	56	34	2	1	402	-----	31
Fall River.....	120, 912	2	3	1	2	2	3	0	4
Springfield.....	144, 227	7	3	1	1	2	18	3	1
Worcester.....	191, 927	15	4	4	3	0	9	0	9
Rhode Island:									
Pawtucket.....	68, 799	-----	1	3	0	0	0	-----	3
Providence.....	242, 378	0	12	8	3	2	1	0	11
Connecticut:									
Bridgeport.....	¹ 143, 555	1	6	3	4	0	1	0	5
Hartford.....	¹ 138, 036	1	6	4	-----	3	7	1	3
New Haven.....	172, 967	1	4	0	1	1	47	0	4
MIDDLE ATLANTIC									
New York:									
Buffalo.....	536, 718	8	10	7	3	0	237	7	28
New York.....	5, 927, 625	179	248	221	66	22	135	32	272
Rochester.....	317, 867	6	4	16	3	1	48	23	8
Syracuse.....	184, 511	12	7	2	-----	2	10	15	4
New Jersey:									
Camden.....	124, 157	8	3	7	0	0	70	2	2
Newark.....	438, 699	38	17	13	11	0	56	12	16
Trenton.....	127, 390	0	4	1	1	1	5	0	0
Pennsylvania:									
Philadelphia.....	1, 922, 788	102	68	139	-----	4	453	32	67
Pittsburgh.....	613, 442	27	17	24	-----	3	416	11	43
Reading.....	110, 917	8	3	1	0	0	115	8	1
Scranton.....	140, 636	2	3	4	0	0	2	0	13

¹ Population Jan. 1, 1920.

City reports for week ended April 25, 1925—Continued

Division, State, and city	Population July 1, 1923, estimated	Chicken pox, cases reported	Diphtheria		Influenza		Measles, cases reported	Mumps, cases reported	Pneumonia, deaths reported
			Cases, estimated expectancy	Cases reported	Cases reported	Deaths reported			
EAST NORTH CENTRAL									
Ohio:									
Cincinnati.....	406,312	18	7	7		15	2	5	20
Cleveland.....	888,519	72	22	27	7	4	11	11	35
Columbus.....	281,062	2	4	3		2	3	2	5
Toledo.....	268,338	8	3	4		6	92	1	6
Indiana:									
Fort Wayne.....	93,573	2	2	0		1	12	0	3
Indianapolis.....	342,718	6	6	2	0	0	12		12
South Bend.....	76,799	1	1	0	0	0	2	0	4
Terre Haute.....	68,939	7	1	1		1	28	0	1
Illinois:									
Chicago.....	2,886,121	75	100	65	34	14	692	13	108
Cicero.....	55,968		2						
Springfield.....	61,833	9	1	0	0	0	9	54	3
Michigan:									
Detroit.....	995,668	24	51	27	8	3	22	10	43
Flint.....	117,968	5	3	0	0	0	14	1	1
Grand Rapids.....	145,947	6	4	2		1	74	1	4
Wisconsin:									
Madison.....	42,519	3	0	0	0	0	8	44	1
Milwaukee.....	484,595	34	13	16	4	3	245	94	41
Racine.....	64,393	7	1	2	2	0	62	19	1
Superior.....	130,671	1	1	0	0	0	0	0	3
WEST NORTH CENTRAL									
Minnesota:									
Duluth.....	106,289	4	2	0		1	0	1	3
Minneapolis.....	409,125	28	14	23	6	6	5	8	12
St. Paul.....	241,891	22	13	10		7	13	26	11
Iowa:									
Davenport.....	61,262	1	1	0	0		0	0	
Des Moines.....	140,923	0	2	0	0		2	0	
Sioux City.....	79,682	0	1	0	0		1	34	
Waterloo.....	39,667	13	0	0	0		0	2	
Missouri:									
Kansas City.....	351,819	10	6	4	7	7	8	17	15
St. Joseph.....	78,232	2	2	1		1	0	1	2
St. Louis.....	803,853	37	39	49	0	0	18	9	
North Dakota:									
Fargo.....	24,841		0						
Grand Forks.....	14,547	1	0	0	0		0	0	
South Dakota:									
Aberdeen.....	15,829	2		0	0		0	0	
Sioux Falls.....	29,206		1						
Nebraska:									
Lincoln.....	58,761	8	2	1	0	0	0	3	0
Omaha.....	204,382	11	4	1	0	0	0	0	16
Kansas:									
Topeka.....	52,555	14	1	2	1	0	1	54	0
Wichita.....	79,251	12	1	0	0	0	3	5	3
SOUTH ATLANTIC									
Delaware:									
Wilmington.....	117,728	2	2	5	0	0	20	3	0
Maryland:									
Baltimore.....	773,580	84	22	26	19	4	12	74	39
Cumberland.....	32,361		1	0		1	0	0	2
Frederick.....	11,301	0	0	1	0	0	1	0	0
District of Columbia:									
Washington.....	1,437,571	0	9	8		5	51		19
Virginia:									
Lynchburg.....	30,277	4	0	2	0	0	1	21	0
Norfolk.....	159,089	12	0	1	0	0	3	100	4
Richmond.....	181,044	9	1	3		1	6	2	5
Roanoke.....	55,902	3	1	0		1	11	1	1
West Virginia:									
Charleston.....	45,397	0	0	1		1	32	2	1
Huntington.....	57,918	0	0	0	0		0	0	
Wheeling.....	156,208	1	1	0		1	5	0	

¹ Population Jan. 1, 1920.

City reports for week ended April 25, 1925—Continued

Division, State, and city	Population July 1, 1923, estimated	Chicken pox, cases reported	Diphtheria		Influenza		Measles, cases reported	Mumps, cases reported	Pneumonia, deaths reported
			Cases, estimated expectancy	Cases reported	Cases reported	Deaths reported			
SOUTH ATLANTIC—continued									
North Carolina:									
Raleigh.....	29,171	3	0	0	0	0	0	0	1
Wilmington.....	35,719	10	1	0	0	0	0	2	2
Winston-Salem.....	56,230	12	1	1	0	0	3	5	1
South Carolina:									
Charleston.....	71,245	0	0	0	-----	1	0	1	2
Columbia.....	39,688	3	0	0	0	0	0	2	1
Greenville.....	25,789	2	0	1	0	0	0	0	1
Georgia:									
Atlanta.....	222,963	7	1	4	2	2	0	0	10
Brunswick.....	15,937	0	1	0	0	0	0	0	0
Savannah.....	89,448	0	1	0	4	4	0	5	4
Florida:									
St. Petersburg.....	24,403	0	1	0	0	0	0	0	0
Tampa.....	56,050	1	1	0	0	0	0	0	0
EAST SOUTH CENTRAL									
Kentucky:									
Covington.....	57,877	0	1	1	-----	4	0	0	2
Louisville.....	257,671	2	5	5	4	0	4	0	17
Tennessee:									
Memphis.....	170,067	9	4	1	-----	4	5	8	10
Nashville.....	121,128	4	0	0	-----	4	24	0	6
Alabama:									
Birmingham.....	195,901	11	1	0	34	2	0	1	13
Mobile.....	63,858	1	0	0	0	1	0	0	2
Montgomery.....	45,383	3	0	0	1	0	0	9	0
WEST SOUTH CENTRAL									
Arkansas:									
Fort Smith.....	30,635	1	1	0	0	-----	0	4	-----
Little Rock.....	70,916	0	1	0	1	0	3	0	0
Louisiana:									
New Orleans.....	404,575	1	8	10	2	2	1	0	14
Shreveport.....	54,590	1	-----	1	-----	2	1	0	5
Oklahoma:									
Oklahoma.....	101,150	0	1	1	4	0	0	1	1
Texas:									
Dallas.....	177,274	31	3	4	0	0	2	0	3
Galveston.....	46,877	3	0	0	0	0	0	1	0
Houston.....	154,970	3	2	2	0	1	0	0	5
San Antonio.....	184,727	0	1	0	0	0	1	0	4
MOUNTAIN									
Montana:									
Billings.....	16,927	0	0	1	0	1	0	13	0
Great Falls.....	27,787	2	1	1	0	0	10	1	1
Helena.....	12,037	-----	0	-----	-----	-----	-----	-----	-----
Missoula.....	12,668	0	1	3	0	0	1	0	1
Idaho:									
Boise.....	22,806	-----	0	-----	-----	-----	-----	-----	-----
Colorado:									
Denver.....	272,031	16	11	18	-----	7	8	78	14
Pueblo.....	43,519	3	2	3	0	0	1	3	3
New Mexico:									
Albuquerque.....	16,648	0	2	0	0	0	0	2	0
Utah:									
Salt Lake City.....	126,241	12	3	2	0	0	2	25	4
Nevada:									
Reno.....	12,429	0	0	0	0	0	0	0	0
PACIFIC									
Washington:									
Seattle.....	1,315,685	67	4	4	0	-----	1	77	-----
Spokane.....	104,573	6	2	5	0	-----	0	0	-----
Tacoma.....	101,731	4	1	2	0	0	0	0	4
Oregon:									
Portland.....	273,621	13	4	16	18	0	2	16	6
California:									
Los Angeles.....	606,853	65	33	25	13	1	61	31	20
Sacramento.....	69,950	2	1	4	0	0	0	1	4
San Francisco.....	539,038	45	24	17	5	2	8	48	8

¹ Population Jan. 1, 1920.

City reports for week ended April 25, 1925—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuber- culosis, deaths re- ported	Typhoid fever			Whoop- ing cough, cases re- ported	Deaths, all causes
	Cases, esti- mated expect- ancy	Cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported		Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported		
NEW ENGLAND											
Maine:											
Portland	2	5	0	0	0	0	1	0	0	0	25
New Hampshire:											
Concord	1	0	0	0	0	0	0	0	0	5	11
Manchester	2	4	0	0	0	1	0	0	0	0	20
Vermont:											
Barre	0	2	0	0	0	1	0	0	0	0	4
Burlington	1	1	1	0	0	0	0	0	0	0	7
Massachusetts:											
Boston	56	81	0	0	0	12	2	4	1	5	240
Fall River	4	2	0	0	0	3	1	1	0	1	37
Springfield	5	20	0	0	0	3	1	0	0	6	38
Worcester	8	11	0	0	0	0	0	1	0	0	35
Rhode Island:											
Pawtucket	1	4	0	1	0	2	0	0	0	0	80
Providence	9	14	0	0	0	5	0	0	0	0	22
Connecticut:											
Bridgeport	6	11	0	0	0	3	0	0	0	5	35
Hartford	4	6	0	0	0	0	0	0	0	8	52
New Haven	8	8	0	0	0	4	0	1	1	0	52
MIDDLE ATLANTIC											
New York:											
Buffalo	19	21	0	0	0	12	0	2	0	27	187
New York	215	256	0	2	0	197	10	19	2	137	1,611
Rochester	14	54	0	0	0	8	1	0	0	13	104
Syracuse	13	8	0	0	0	1	0	0	0	2	50
New Jersey:											
Camden	3	21	0	2	3	2	0	0	1	5	52
Newark	25	35	0	0	0	9	1	1	0	44	127
Trenton	3	2	0	0	0	3	1	1	0	7	52
Pennsylvania:											
Philadelphia	71	183	0	19	3	30	3	3	0	79	487
Pittsburgh	20	73	0	0	0	12	1	2	0	7	206
Reading	3	11	0	0	0	1	0	0	0	8	42
Scranton	2	4	0	0	0	1	0	0	0	5	5
EAST NORTH CENTRAL											
Ohio:											
Cincinnati	12	32	2	0	0	17	1	1	0	1	152
Cleveland	20	25	1	0	0	11	1	0	0	41	224
Columbus	6	10	1	13	0	8	0	0	1	11	73
Toledo	15	12	3	0	0	5	0	0	0	19	70
Indiana:											
Fort Wayne	2	7	2	1	0	0	0	0	0	2	26
Indianapolis	15	7	4	16	0	7	0	1	1	1	107
South Bend	3	10	1	0	0	0	0	0	0	2	15
Terre Haute	2	6	1	1	0	0	0	0	0	0	19
Illinois:											
Chicago	74	260	2	5	0	53	2	2	0	143	794
Cicero	1	0	0	0	0	0	0	0	0	0	0
Springfield	1	4	1	0	0	2	1	1	1	0	32
Michigan:											
Detroit	75	121	6	1	0	20	3	1	0	86	286
Flint	6	4	1	2	0	1	0	0	0	3	20
Grand Rapids	7	48	1	2	0	1	0	0	0	1	45
Wisconsin:											
Madison	3	1	1	0	0	0	0	1	0	10	12
Milwaukee	29	26	1	12	5	4	1	0	0	26	155
Racine	5	2	1	0	0	1	0	2	0	1	14
Superior	2	13	2	0	0	3	0	0	0	0	16

¹ Pulmonary tuberculosis only.

City reports for week ended April 25, 1925—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuber- culosis, deaths re- ported	Typhoid fever			Whoop- ing cough, cases re- ported	Deaths, all causes
	Cases, esti- mated expect- ancy	Cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported		Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported		
WEST NORTH CENTRAL											
Minnesota:											
Duluth.....	4	19	2	0	0	1	0	0	0	1	26
Minneapolis.....	26	74	8	11	5	11	1	0	0	3	108
St. Paul.....	19	34	6	1	0	5	1	0	0	14	84
Iowa:											
Davenport.....	2	4	4	1	—	—	0	0	—	1	—
Des Moines.....	11	7	2	0	—	—	0	0	—	0	—
Sioux City.....	3	3	1	0	—	—	0	0	—	0	—
Waterloo.....	2	0	0	0	—	—	0	0	—	7	—
Missouri:											
Kansas City.....	11	75	3	0	0	14	1	0	0	8	114
St. Joseph.....	2	0	0	0	0	1	0	0	0	2	34
St. Louis.....	33	113	2	10	0	10	1	3	0	8	227
North Dakota:											
Fargo.....	2	—	0	—	—	—	0	—	—	—	—
Grand Forks.....	0	0	0	0	—	—	0	0	—	0	—
South Dakota:											
Aberdeen.....	—	1	—	0	—	—	—	0	—	0	—
Sioux Falls.....	2	—	0	—	—	—	0	—	—	—	—
Nebraska:											
Lincoln.....	3	0	0	0	0	1	0	0	0	3	14
Omaha.....	4	2	2	21	0	5	0	0	0	1	78
Kansas:											
Topeka.....	2	5	2	0	0	3	0	0	0	0	17
Wichita.....	2	1	3	0	0	3	1	0	0	14	—
SOUTH ATLANTIC											
Delaware:											
Wilmington.....	3	5	0	0	0	1	0	0	0	2	20
Maryland:											
Baltimore.....	28	41	0	2	0	19	2	0	0	91	237
Cumberland.....	1	1	0	0	0	0	0	0	1	—	16
Frederick.....	2	0	0	0	0	0	0	0	0	0	4
District of Colum- bia:											
Washington.....	19	25	1	8	4	16	1	2	1	0	160
Virginia:											
Lynchburg.....	0	1	0	0	0	0	0	0	0	14	7
Norfolk.....	1	2	1	0	0	4	0	0	0	11	—
Richmond.....	2	4	0	1	0	4	0	1	0	0	50
Roanoke.....	1	0	1	0	0	2	0	0	0	—	15
West Virginia:											
Charleston.....	1	2	1	2	0	1	0	0	0	1	27
Huntington.....	0	4	0	10	—	—	0	0	—	0	—
Wheeling.....	2	0	0	0	0	0	0	0	0	—	25
North Carolina:											
Raleigh.....	0	0	0	1	0	1	0	0	0	2	24
Wilmington.....	1	0	0	7	0	0	0	0	0	1	10
Winston-Salem.....	1	1	2	13	0	2	0	0	0	15	12
South Carolina:											
Charleston.....	1	0	1	0	0	3	1	0	0	2	25
Columbia.....	0	0	1	0	0	0	0	1	0	2	16
Greenville.....	0	0	0	4	0	1	0	1	0	0	6
Georgia:											
Atlanta.....	3	3	4	0	0	3	0	0	0	3	80
Brunswick.....	0	0	0	0	0	0	1	1	0	0	2
Savannah.....	0	0	1	0	0	5	1	0	0	5	34
Florida:											
St. Petersburg.....	3	0	0	0	0	2	0	0	1	0	19
Tampa.....	0	1	0	1	0	1	0	1	0	0	19
EAST SOUTH CENTRAL											
Kentucky:											
Covington.....	1	4	0	0	0	2	1	2	0	0	30
Louisville.....	4	16	1	4	0	2	1	1	0	5	81
Tennessee:											
Memphis.....	4	2	2	17	1	8	0	0	0	2	64
Nashville.....	2	11	0	7	0	2	0	0	0	1	54
Alabama:											
Birmingham.....	1	12	0	51	1	3	1	0	0	0	64
Mobile.....	0	0	1	0	0	1	0	1	0	0	13
Montgomery.....	1	0	1	1	0	0	0	10	0	0	16

City reports for week ended April 25, 1925—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuber- culosis, deaths re- ported	Typhoid fever			Whoop- ing cough, cases re- ported	Deaths, all causes
	Cases, esti- mated expect- ancy	Cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported		Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported		
WEST SOUTH CENTRAL											
Arkansas:											
Port Smith.....	0	2	0	0			0			0	
Little Rock.....	1	0	0	0	0	1	0	0	0	0	
Louisiana:											
New Orleans.....	3	15	4	1	0	21	2	2	2	10	172
Shreveport.....		1		1	0	0		0	1	0	37
Oklahoma:											
Oklahoma.....	2	1	4	0	0	3	0	1	0		20
Texas:											
Dallas.....	2	6	2	0	0	3	0	2	1	22	48
Galveston.....	0	2	0	1	0	0	1	7	2	0	10
Houston.....	0	0	1	6	0	3	0	0	0	0	56
San Antonio.....	1	0	0	0	0	7	0	0	0	1	61
MOUNTAIN											
Montana:											
Billings.....	1	3	2	0	0	0	0	0	0	1	6
Great Falls.....	1	23	1	2	0	0	0	0	0	0	12
Helena.....	0		0				0				
Missoula.....	1	1	1	0	0	0	0	1	0	0	8
Idaho:											
Boise.....	2		1				0				
Colorado:											
Denver.....	10	11	2	0	0	17	0	0	0	10	91
Pueblo.....	1	1	0	0	0	0	0	1	0	0	15
New Mexico:											
Albuquerque.....	0	0	0	0	0	4	0	0	0	0	10
Utah:											
Salt Lake City.....	3	3	1	0	0	1	1	1	0	8	28
Nevada:											
Reno.....	0	0	0	1	0	0	0	0	0	0	0
PACIFIC											
Washington:											
Seattle.....	8	8	3	17			0	1		115	
Spokane.....	3	2	7	2			0	0		9	
Tacoma.....	2	4	1	7	0	2	1	2	0	4	29
Oregon:											
Portland.....	7	4	4	7	0	6	0	0	0	21	
California:											
Los Angeles.....	13	30	1	47	0	23	2	1	0	58	216
Sacramento.....	1	0	0	1	0	4	1	0	0	6	28
San Francisco.....	16	7	2	17	1	18	1	4	0	53	151

Division, State, and city	Cerebrospinal meningitis		Lethargic encephalitis		Pellagra		Poliomyelitis (infan- tile paralysis)		
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases, esti- mated expect- ancy	Cases	Deaths
NEW ENGLAND									
Massachusetts:									
Boston.....		2		0		0		1	0
Rhode Island:									
Providence.....		0		0		0		0	1
MIDDLE ATLANTIC									
New York:									
New York.....		0		1		2		0	1
New Jersey:									
Trenton.....		0		0		0		1	0

City reports for week ended April 25, 1925—Continued

Division, State, and city	Cerebrospinal meningitis		Lethargic encephalitis		Pellagra		Poliomyelitis (infantile paralysis)		
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases, estimated expectancy	Cases	Deaths
EAST NORTH CENTRAL									
Ohio:									
Cincinnati.....	0	0	0	1	0	0	0	0	0
Illinois:									
Chicago.....	0	0	1	1	0	0	0	0	0
Michigan:									
Detroit.....	1	0	1	0	0	0	0	0	0
Flint.....	0	0	0	0	0	0	0	1	0
Wisconsin:									
Milwaukee.....	0	0	0	0	0	0	0	1	1
WEST NORTH CENTRAL									
Missouri:									
St. Louis.....	1	0	0	0	0	0	0	0	0
Kansas:									
Wichita.....	1	1	0	0	0	0	0	0	0
SOUTH ATLANTIC									
South Carolina:									
Columbia.....	0	0	0	0	0	4	0	0	0
Greenville.....	0	0	0	0	0	1	0	0	0
Florida:									
St. Petersburg.....	0	0	0	1	0	0	0	0	1
EAST SOUTH CENTRAL									
Kentucky:									
Louisville.....	2	1	0	0	0	0	0	0	0
Tennessee:									
Memphis.....	0	0	0	0	0	1	0	0	0
Nashville.....	0	0	0	0	0	1	0	0	0
Alabama:									
Mobile.....	0	0	0	0	1	1	0	0	0
Montgomery.....	0	0	0	0	1	0	0	0	0
WEST SOUTH CENTRAL									
Arkansas:									
Little Rock.....	0	1	0	1	1	0	0	0	0
Louisiana:									
New Orleans.....	0	0	0	0	1	2	0	0	0
Shreveport.....	0	1	0	0	0	4	0	0	0
Texas:									
Galveston.....	0	0	0	0	0	0	0	1	0
San Antonio.....	0	0	0	1	0	0	0	0	0
PACIFIC									
Washington:									
Spokane.....	1		0		0		0	0	0
Oregon:									
Portland.....	2	1	0	0	0	0	0	0	0
California:									
Los Angeles.....	0	0	2	1	0	1	1	5	0

The following table gives the rates per hundred thousand population for 105 cities for the 10-week period ended April 25, 1925. The population figures used in computing the rates were estimated as of July 1, 1923, as this is the latest date for which estimates are available. The 105 cities reporting cases had an estimated aggregate population of nearly 29,000,000 and the 97 cities reporting deaths had more than 28,000,000 population. The number of cities included in each group and the aggregate populations are shown in a separate table below:

Summary of weekly reports from cities, February 15 to April 25, 1925—Annual rates per 100,000 population ¹

DIPHTHERIA CASE RATES

	Week ended—									
	Feb. 21	Feb. 28	Mar. 7	Mar. 14	Mar. 21	Mar. 28	Apr. 4	Apr. 11	Apr. 18	Apr. 25
105 cities.....	149	² 169	162	167	167	³ 168	177	⁴ 158	⁵ 161	⁶ 162
New England.....	241	² 189	233	176	147	119	171	166	129	144
Middle Atlantic.....	163	178	167	214	196	231	241	220	228	⁷ 218
East North Central.....	123	119	114	128	134	112	93	⁴ 97	¹ 111	¹ 114
West North Central.....	209	299	282	201	199	247	220	226	168	⁷ 191
South Atlantic.....	156	114	104	91	136	96	81	73	102	108
East South Central.....	80	51	63	40	69	57	23	34	46	40
West South Central.....	125	162	144	158	97	121	83	107	⁸ 66	79
Mountain.....	162	153	86	106	143	134	124	105	239	² 285
Pacific.....	165	258	235	197	249	¹ 179	374	171	168	166

MEASLE CASE RATES

105 cities.....	383	² 358	418	449	506	³ 507	558	⁴ 530	⁵ 589	⁶ 645
New England.....	720	² 585	656	542	725	755	957	1,011	917	1,217
Middle Atlantic.....	373	343	428	518	598	633	734	680	815	782
East North Central.....	688	632	789	740	775	798	736	⁴ 706	⁵ 731	⁶ 894
West North Central.....	27	73	68	75	93	89	77	58	91	⁷ 104
South Atlantic.....	110	81	100	146	189	136	209	207	256	295
East South Central.....	51	46	86	11	69	34	69	34	97	189
West South Central.....	14	51	23	88	42	9	88	51	⁸ 72	37
Mountain.....	620	916	29	763	573	38	219	57	267	² 224
Pacific.....	64	61	107	110	189	¹ 151	209	241	154	203

SCARLET FEVER CASE RATES

105 cities.....	390	² 408	395	432	427	³ 419	409	⁴ 366	⁵ 343	⁶ 350
New England.....	606	² 558	584	534	544	604	534	529	350	467
Middle Atlantic.....	376	412	372	439	417	405	436	359	343	336
East North Central.....	432	434	433	497	498	483	442	⁴ 419	⁴ 404	⁴ 431
West North Central.....	742	734	775	719	792	755	736	647	651	⁷ 691
South Atlantic.....	167	203	171	219	146	167	175	152	167	175
East South Central.....	223	183	194	355	286	286	263	280	229	257
West South Central.....	125	144	185	107	134	102	51	88	⁸ 61	121
Mountain.....	248	315	286	200	429	248	277	258	315	² 428
Pacific.....	186	223	218	229	218	¹ 222	191	174	145	148

SMALLPOX CASE RATES

105 cities.....	66	² 66	62	61	63	³ 58	57	⁴ 51	⁵ 49	⁶ 62
New England.....	0	² 0	0	0	0	0	12	2	0	2
Middle Atlantic.....	2	3	1	5	8	7	21	10	18	12
East North Central.....	56	28	42	39	32	33	24	⁴ 22	⁴ 27	⁴ 40
West North Central.....	126	120	114	124	102	135	87	97	85	⁷ 91
South Atlantic.....	67	43	51	59	57	67	49	43	53	79
East South Central.....	532	583	652	446	646	423	42	572	395	457
West South Central.....	83	116	74	74	107	107	46	51	⁸ 17	42
Mountain.....	86	57	48	96	67	19	19	19	10	³ 31
Pacific.....	215	313	206	247	212	¹ 191	255	148	162	264

¹ The figures given in this table are rates per 100,000 population, annual basis, and not the number of cases reported. Populations used are estimated as of July 1, 1923.

² Hartford, Conn., not included. Report not received at time of going to press.

³ Spokane, Wash., not included.

⁴ Cicero, Ill., not included.

⁵ Cicero, Ill., and Dallas, Tex., not included.

⁶ Cicero, Ill., Fargo, N. Dak., Sioux Falls, S. Dak., Helena, Mont., and Boise, Idaho, not included.

⁷ Fargo, N. Dak., and Sioux Falls, S. Dak., not included.

⁸ Dallas, Tex. not included.

⁹ Helena, Mont., and Boise, Idaho, not included.

Summary of weekly reports from cities, February 15 to April 25, 1925—Annual rates per 100,000 population

TYPHOID FEVER CASE RATES

	Week ended—									
	Feb. 21	Feb. 28	Mar. 7	Mar. 14	Mar. 21	Mar. 28	Apr. 4	Apr. 11	Apr. 18	Apr. 25
105 cities.....	11	² 14	11	10	12	³ 11	9	⁴ 10	⁵ 11	⁶ 16
New England.....	0	² 13	7	5	30	12	5	2	7	17
Middle Atlantic.....	10	8	10	5	8	7	4	9	11	14
East North Central.....	6	7	11	4	7	3	4	⁴ 6	⁵ 5	⁶ 7
West North Central.....	4	17	6	10	8	6	2	2	2	⁶ 6
South Atlantic.....	8	20	8	24	22	12	30	20	12	14
East South Central.....	34	34	34	34	46	57	17	17	34	80
West South Central.....	42	42	28	28	23	42	32	37	⁸ 39	61
Mountain.....	38	76	10	19	0	0	0	19	38	⁸ 31
Pacific.....	23	9	15	15	0	² 28	20	9	12	23

INFLUENZA DEATH RATES

	30	² 34	30	34	42	33	34	⁴ 27	¹⁰ 28	⁶ 30
105 cities.....										
New England.....	17	² 40	17	35	30	30	35	32	27	30
Middle Atlantic.....	21	20	15	24	29	22	21	16	24	17
East North Central.....	18	24	27	33	49	40	38	⁴ 27	⁴ 25	⁶ 33
West North Central.....	22	37	35	33	42	46	39	37	50	⁷ 49
South Atlantic.....	55	49	53	33	53	12	28	26	12	43
East South Central.....	74	126	103	91	120	86	69	74	80	86
West South Central.....	153	148	143	107	76	36	36	46	¹¹ 47	25
Mountain.....	57	19	19	48	48	38	181	86	38	⁸ 82
Pacific.....	12	29	29	16	12	53	29	12	29	12

PNEUMONIA DEATH RATES

	216	² 201	205	222	217	206	204	⁴ 202	¹⁰ 195	⁶ 204
105 cities.....										
New England.....	241	² 242	226	229	211	219	251	211	206	186
Middle Atlantic.....	216	185	210	214	217	199	215	190	204	223
East North Central.....	184	171	195	241	222	214	182	⁴ 191	⁴ 191	⁶ 213
West North Central.....	131	166	140	175	173	166	193	228	171	⁷ 139
South Atlantic.....	252	305	258	246	200	252	234	238	252	191
East South Central.....	320	292	239	396	286	269	269	343	236	286
West South Central.....	408	290	229	178	178	165	168	168	¹¹ 160	158
Mountain.....	219	267	162	210	172	200	162	267	210	⁸ 234
Pacific.....	213	163	139	155	131	139	159	119	98	147

² Hartford, Conn., not included. Report not received at time of going to press.

³ Spokane, Wash., not included.

⁴ Cicero, Ill., not included.

⁵ Cicero, Ill., and Dallas, Tex., not included.

⁶ Cicero, Ill., Fargo, N. Dak., Sioux Falls, S. Dak., Helena, Mont., and Boise, Idaho, not included.

⁷ Fargo, N. Dak., and Sioux Falls, S. Dak., not included.

⁸ Dallas, Tex., not included.

⁹ Helena, Mont., and Boise, Idaho, not included.

¹⁰ Cicero, Ill., and New Orleans, La., not included.

¹¹ New Orleans, La., not included.

Number of cities included in summary of weekly reports and aggregate population of cities in each group, estimated as of July 1, 1923

Group of cities	Number of cities reporting cases	Number of cities reporting deaths	Aggregate population of cities reporting cases	Aggregate population of cities reporting deaths
Total.....	105	97	28,898,350	28,140,934
New England.....	12	12	2,098,746	2,098,746
Middle Atlantic.....	10	10	10,304,114	10,304,114
East North Central.....	17	17	7,032,535	7,032,535
West North Central.....	14	11	2,515,330	2,281,454
South Atlantic.....	22	22	2,566,901	2,566,901
East South Central.....	7	7	911,885	911,885
West South Central.....	8	6	1,124,564	1,023,013
Mountain.....	9	9	546,445	546,445
Pacific.....	6	3	1,797,830	1,275,841

FOREIGN AND INSULAR

BOLIVIA

Smallpox—Typhus fever—La Paz—March, 1925.—During the month of March, 1925, there were reported at La Paz, Bolivia, five deaths from smallpox, and one case of typhus fever.

CANADA

Communicable diseases—Ontario—March 29–April 25, 1925 (comparative).—During the four-week period ended April 25, 1925, communicable diseases were reported in the province of Ontario as follows:

Disease	1925		1924	
	Cases	Deaths	Cases	Deaths
Cerebrospinal meningitis.....		2	6	2
Chancroid.....	4			
Chicken pox.....	322		398	
Diphtheria.....	182	16	188	20
German measles.....	6		190	
Gonorrhea.....	64		16	3
Influenza.....	88		98	
Lethargic encephalitis.....	160	36		14
Measles.....	4	3		6
Mumps.....	1,643	2	3,209	4
Pneumonia.....	848		1,609	
Scarlet fever.....		203		232
Septic sore throat.....	603	8	691	12
Smallpox.....	15		8	1
Syphilis.....	12		49	3
Tuberculosis.....	119		118	
Typhoid fever.....	142	83	180	93
Whooping cough.....	26	2	34	7
	352	10	140	4

Smallpox.—Smallpox was reported present in four localities, the largest number of cases, viz, 7, being reported at Welland.

CUBA

Communicable diseases—Provinces—January and February, 1925.—Cases of diseases were notified in the provinces of Cuba for the months of January and February, 1925, as follows:

(1024)

JANUARY, 1925

Disease	Pinar del Rio	Habana	Matanzas	Santa Clara	Camaguey	Oriente	Total
Chicken pox.....		9		1	1	6	17
Diphtheria.....	1	20				6	27
Malaria.....	20	67	8	4	76	558	733
Measles.....	1	31	1	12	1	6	52
Paratyphoid fever.....		3		1			4
Scarlet fever.....	2						2
Tetanus (infantile).....				1			1
Typhoid fever.....	9	49	5	25	8	20	116

FEBRUARY, 1925

Cerebrospinal meningitis.....				1			1
Chicken pox.....		6		2	1	1	10
Diphtheria.....		23	4	2	1	3	33
Malaria.....	15	64	6	5	79	707	876
Measles.....	3	44	6	42	2	9	106
Paratyphoid fever.....		3	1		2		6
Poliomyelitis.....	10						10
Scarlet fever.....	3	9					12
Smallpox.....						1	1
Tetanus (infantile).....	1						1
Typhoid fever.....	18	34	6	29	5	14	106

Communicable diseases—Habana—March 1–31, 1925.—During the period March 1 to 31, 1925, communicable diseases were reported at Habana, Cuba, as follows:

Disease	Mar. 1–31, 1925		Remain- ing under treatment Mar. 31, 1925
	New cases	Deaths	
Cerebrospinal meningitis.....	1	1	0
Chicken pox.....	14	1	18
Diphtheria.....	13	3	2
Leprosy.....			10
Malaria.....	36		120
Measles.....	132	1	64
Scarlet fever.....	8		8
Typhoid fever.....	30	5	131

¹ A number of cases of chicken pox, malaria, and typhoid fever were from the interior of the island; one case of chicken pox and one case of typhoid fever were from abroad.

ECUADOR

Plague—Plague-infected rats—March 16–April 15, 1925.—During the period March 16 to April 15, 1925, 10 cases of plague with four deaths were reported in Ecuador. Of these, one case occurred at Daule, and nine cases at Guayaquil. During the same period, out of 22,290 rats taken, 60 were found plague infected.

ITALY

Malta fever—Catania—Province of Syracuse—March 24–30, 1925.—During the week ended March 30, 1925, Malta fever was reported in Italy as follows: Catania, two cases; Province of Syracuse, one case.

JAMAICA

Smallpox (reported as alastrim)—Typhoid fever—February 1–April 25, 1925.—Smallpox (reported as alastrim) and typhoid fever have been reported in the Island of Jamaica, exclusive of Kingston, as follows: *Smallpox*—February 1–28, 1925: Cases, 34; March 1–28, 1925: Cases, 98; March 29–April 25, 1925: Cases, 100. *Typhoid fever*—February 1–28, 1925: Cases, 56; March 1–28, 1925: Cases, 50; March 29–April 25, 1925: Cases, 50.

Chicken pox—Lethargic encephalitis—During the same period, 28 cases of chicken pox and 4 cases of lethargic encephalitis were reported in the Island of Jamaica, exclusive of Kingston.

MALTA

Communicable diseases—March 16–31, 1925.—During the period March 16 to 31, 1925, 5 cases of chicken pox, 255 cases of influenza, 12 cases of Malta (undulant) fever, and 1 case of poliomyelitis (infantile paralysis) were notified in the island of Malta. Population, 223,088.

MEXICO

Decree against wooden construction at Gulf ports.—According to information dated April 24, 1925, a recent decree of the President of the Republic of Mexico prohibits the construction of wooden houses or other structures at Gulf ports, as a measure against rat harborage.

Epidemic cerebrospinal meningitis—State of Morelos.—April 22–25, 1925.—During the period April 22 to 25, 1925, eight cases of epidemic cerebrospinal meningitis were reported in the State of Morelos, Mexico.¹

UNION OF SOUTH AFRICA

Plague—March 15–21, 1925.—During the week ended March 21, 1925, three cases of plague with two deaths were reported in the Union of South Africa. Of these, one case occurred in the white population. The occurrence was on farms.

¹Public Health Reports, May 8, 1925, p. 972.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER

The reports contained in the following tables must not be considered as complete or final as regards either the lists of countries included or the figures for the particular countries for which reports are given.

Reports Received During Week Ended May 15, 1925 ¹**CHOLERA**

Place	Date	Cases	Deaths	Remarks
India.....				Feb. 22-Mar. 7, 1925: Cases, 4,339; deaths, 2,451.
Calcutta.....	Mar. 15-21.....	25	16	
Rangoon.....	Mar. 22-28.....	1	1	
Siam:				
Bangkok.....	Mar. 15-21.....		1	

PLAGUE

Brazil:				
Bahia.....	Mar. 29-Apr. 4.....	3	2	
British East Africa:				
Tanganyika.....	Mar. 8-14.....	1	1	
Uganda.....	Jan. 1-31.....	29	28	
Ceylon:				
Colombo.....	Mar. 22-28.....	2	2	
Ecuador.....				Mar. 16-Apr. 15, 1925: Cases, 10; deaths, 4.
Daule.....	Mar. 16-31.....	1		Rats taken, 22,200; found infected, 60.
Guayaquil.....	Mar. 16-Apr. 15.....	9	4	
India.....				Feb. 22-Mar. 7, 1925: Cases, 9,444; deaths, 7,777.
Karachi.....	Mar. 29-Apr. 4.....	4	5	
Rangoon.....	Mar. 15-28.....	36	27	
Java:				
East Java—				
Soerabaya.....	Feb. 26-Mar. 11.....	11	9	
Soerakarta.....	Feb. 20.....			Epidemic plague in one locality.
West Java—				
Cheribon.....	Feb. 19-25.....		13	
Pekalongan.....	do.....		38	
Tegal.....	do.....		10	
Siam:				
Bangkok.....	Mar. 15-21.....	4	4	
Straits Settlements:				
Singapore.....	do.....	2		
Union of South Africa.....				Mar. 15-21, 1925: Cases, 3; deaths, 2; 1 case in white population.
Bothaville area.....	Mar. 15-21.....	1		White; on farm.
Kroonstad district.....	do.....	2	2	Native; on farms.

SMALLPOX

Algeria:				
Algiers.....				Mar. 1-31, 1925: Cases, 4.
Argentina:				
Buenos Aires.....	Mar. 15-21.....	1		
Bolivia:				
La Paz.....	Mar. 1-31.....		5	
Brazil:				
Pernambuco.....	Mar. 1-14.....	8	8	
British East Africa:				
Mombasa.....	Mar. 8-28.....	29	7	
Canada:				
British Columbia—				
Vancouver.....	Apr. 19-25.....	8		
Victoria.....	do.....	1		
Ontario.....				Mar. 29-Apr. 25, 1925: Cases, 12.
Kingston.....	Apr. 12-18.....	1		
Welland.....	Mar. 22-Apr. 25.....	7		
Ceylon:				
Colombo.....	Mar. 22-28.....	1		Port case.
China:				
Canton.....	Mar. 15-28.....			Prevalent.
Hongkong.....	Mar. 15-21.....	8	3	
Egypt:				
Cairo.....	Jan. 29-Feb. 4.....	1	1	
Great Britain:				
England and Wales.....	Mar. 22-Apr. 11.....	435		

¹ From medical officers of the Public Health Service, American consuls, and other sources.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received During Week Ended May 15, 1925—Continued

SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
India.....				Feb. 22-Mar. 7, 1925: Cases, 9,948; deaths, 2,432.
Calcutta.....	Mar. 15-21.....	581	451	
Karachi.....	Mar. 26-Apr. 4.....	8	4	
Rangoon.....	Mar. 15-28.....	406	102	
Jamaica.....				Feb. 1-Apr. 25, 1925: Cases, 232. Exclusive of Kingston. Reported as alastrim.
Japan:				
Nagasaki.....	Apr. 6-12.....	11	2	
Java:				
East Java—				
Soerabaya.....	Feb. 26-Mar. 11.....	85	16	
Latvia.....				Feb. 1-28, 1925: Cases, 1.
Mexico:				Reported severely prevalent.
Chiapas (State).....	Mar. 1.....			
Guadalajara.....	Apr. 21-27.....	4		
Oaxaca (State).....	Mar. 1.....			Do.
Mexico City.....	Apr. 12-18.....	12		Including municipalities in Federal district.
Tampico.....	Apr. 1-20.....	5	2	
Vera Cruz.....	Apr. 12-19.....		1	
Paraguay:				
Asuncion.....	Jan. 4-10.....		1	
Siam:				
Bangkok.....	Mar. 15-21.....	1	1	
Spain:				
Malaga.....	Apr. 12-18.....		1	
Switzerland:				
Berne.....	Mar. 15-21.....	1		
Union of South Africa:				
Cape Province.....	do.....			Outbreaks.
Transvaal.....	do.....			Do.

TYPHUS FEVER

Algeria:				
Algiers.....				Mar. 1-31, 1925: Cases, 5; deaths, 2.
Bolivia:				
La Paz.....	Mar. 1-31.....	1		
Egypt:				
Cairo.....	Jan. 22-28.....	1		
Greece:				
Athens.....	Mar. 11-31.....		4	
Latvia.....				Feb. 1-28, 1925: Cases, 11.
Mexico:				
Mexico City.....	Apr. 12-18.....	7		Including municipalities in Federal District.
Union of South Africa:				
Cape Province.....	Mar. 1-15.....			Outbreaks.
East London.....	Mar. 15-Apr. 4.....	2	2	
Natal:				
Durban.....	Mar. 8-14.....	1		

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received from December 27, 1924, to May 8, 1925¹

CHOLERA

Place	Date	Cases	Deaths	Remarks
Ceylon				
Colombo	Nov. 16-22	1		June 29-Dec. 27, 1924: Cases, 14; deaths, 13. Dec. 28, 1924-Jan. 24, 1925: Cases, 24; deaths, 17.
Do.	Jan. 11-24	2	2	
India				Oct. 19, 1924, to Jan. 3, 1925: Cases, 27,164; deaths, 16,228. Jan. 4-Feb. 21, 1925: Cases, 15,894; deaths, 9,381.
Bombay	Nov. 23-Dec. 20	4	4	
Do.	Jan. 18-24	1	1	
Calcutta	Oct. 25-Jan. 3	59	51	
Do.	Jan. 4-Mar. 14	180	148	
Madras	Nov. 16-Jan. 3	69	40	
Do.	Jan. 4-Mar. 7	139	98	
Rangoon	Nov. 9-Dec. 20	9	2	
Do.	Jan. 4-Mar. 14	13	9	
Indo-China				Aug. 1-Sept. 30, 1924: Cases, 14; deaths, 10. Dec. 1-31, 1924: Cases, 5; deaths, 2.
Province—				
Anam	Aug. 1-31	1	1	
Cambodia	Aug. 1-Sept. 30	6	5	
Do.	Dec. 1-31	1		
Cochin-China	Aug. 1-Dec. 31	10	5	
Saigon	Nov. 30-Dec. 6	1		
Tonkin	Dec. 1-31	1	1	
Siam				
Bangkok	Nov. 9-29	4	2	
Do.	Jan. 18-Mar. 14	8	4	

PLAGUE

Azores:				
Fayal Island—				Present with several cases.
Castelo Branco	Nov. 25			
Feteira	do.	1		
St. Michael Island	Nov. 2-Jan. 3	30	13	
Do.	Jan. 18-24	3	1	
Brazil:				
Bahia	Jan. 4-Mar. 21	6	4	Bubonic.
Santos	Year, 1924	2		
British East Africa:				
Tanganyika Territory	Nov. 23-Dec. 27	17	10	
Do.	Jan. 18-24	17	11	
Uganda	Aug.-Dec., 1924	279	243	
Canary Islands:				
Las Palmas	Jan. 21-23	2		Stated to be endemic.
Do.	Feb. 4	1		Stated to have been infected with plague Sept. 30, 1924.
Do.	Mar. 26	1	1	
Realejo Alto	Dec. 19	3	1	Vicinity of Santa Cruz de Tenerife.
Tenerife—				
Santa Cruz	Jan. 3	1		In vicinity.
Celebes:				
Macassar	Oct. 29			Epidemic.
Ceylon:				
Colombo	Nov. 9-Jan. 3	12	9	
Do.	Jan. 4-Mar. 21	14	15	
China:				
Foochow	Dec. 28-Jan. 3			Present.
Nanking	Nov. 23-Mar. 7			Do.
Shing Hsien	October, 1924		790	
Ecuador:				
Chimborazo Province—				
Alausi District	Jan. 14		14	At 2 localities on Guayaquil & Quito Ry.
Guayaquil	Nov. 16-Dec. 31	9	3	Rats taken, 27,004; found infected, 92.
Do.	Jan. 1-Mar. 15	59	25	Rats taken, 45,027; rats found infected, 234.
Naranjito	Feb. 16-Mar. 15	1		
Yaguachi	Feb. 1-Mar. 15	2	1	
Egypt:				Year 1924: Cases, 373. Jan. 1-Apr. 1, 1925: Cases, 17; deaths, 9.
City—				
Alexandria	Year 1924	2	2	Last case Nov. 25.
Ismailia	do.	1	1	Last case, July 6.
Port Said	do.	6	4	Last case, Dec. 7.
Suez	do.	20	13	Last case, Dec. 20.
Do.	Apr. 2	1	1	Last case, Apr. 2.

¹From medical officers of the Public Health Service, American consuls, and other sources.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received from December 27, 1924, to May 8, 1925—Continued

PLAGUE—Continued

Place	Date	Cases	Deaths	Remarks
Egypt—Continued.				
Province—				
Beni-Souef.....	Jan. 18.....	1	1	Last case, Jan. 18.
Dakhalia.....	Jan. 1-8.....	1	1	Last case, Jan. 7.
Girgeh.....	Jan. 9.....	1	1	Last case, Jan. 9.
Kalioubiah.....	Jan. 5-22.....	8	2	Last case, Jan. 22.
Menoufieh.....	Jan. 1-8.....	7	3	Last case, Jan. 3.
Minieh.....	Apr. 1.....	1		Last case, Apr. 1.
Gold Coast.....				September-December, 1924: Deaths, 52.
Hawaii:				
Honokaa.....	Nov. 4.....	1		Plague-infected rodents found, Dec. 9, 1924, and Jan. 15, 1925: Oct. 19, 1924, to Jan. 3, 1925: Cases, 28,154; deaths, 21,506. Jan. 4-Feb. 21, 1925: Cases, 28,880; deaths, 24,022.
India.....				
Bombay.....	Nov. 22-Jan. 3.....	4	3	
Do.....	Jan. 4-17.....	2	2	
Do.....	Feb. 8-Mar. 14.....	26	22	
Calcutta.....	Jan. 18-24.....	1	1	
Karachi.....	Nov. 30-Dec. 6.....	2	1	
Do.....	Jan. 4-Feb. 21.....	12	11	
Madras Presidency.....	Nov. 23-Jan. 3.....	685	487	
Do.....	Jan. 4-24.....	658	511	
Rangoon.....	Oct. 26-Jan. 3.....	26	25	
Do.....	Jan. 4-Mar. 14.....	121	109	
Indo-China.....				
Province—				
Anam.....	Aug. 1-Sept. 30.....	4	4	Aug. 1-Sept. 30, 1924: Cases, 25; deaths, 20. Dec. 1-31, 1924: Cases, 11; deaths, 11. Corresponding month, 1923: Cases, 15; deaths, 5.
Do.....	Dec. 1-31.....	5	5	
Cambodia.....	Aug. 1-Sept. 30.....	18	15	
Do.....	Dec. 1-31.....	6	6	
Cochin-China.....	do.....	3	1	
Saigon.....	Dec. 25-31.....	1	1	Including 100 square kilometers of surrounding territory.
Do.....	Jan. 11-17.....	2	1	Do.
Iraq.....	June 29-Jan. 3.....	20	14	
Japan.....	Aug. 10-Dec. 6.....	19		
Java:				
East Java—				
Blitar.....	Nov. 11-22.....			Province of Kediri; epidemic.
Pare.....	Nov. 29.....			Do.
Samarang.....	Mar. 22-28.....	2	2	
Sidoardja.....	Jan. 2.....			Declared epidemic, Province of Soerabaya.
Soerabaya.....	Nov. 16-Dec. 31.....	71	72	
Do.....	Jan. 15-Feb. 28.....	6	5	Mar. 29-Apr. 4, 1925. Two plague rats found.
West Java—				
Cheribon.....	Oct. 14-Nov. 3.....		14	
Do.....	Nov. 18-Dec. 22.....		80	
Do.....	Jan. 1-14.....		44	
Do.....	Feb. 5-11.....		13	
Paseroean.....	Dec. 27.....			Province. Epidemic in one locality.
Pekalongan.....	Oct. 14-Nov. 3.....		29	
Do.....	Nov. 18-Dec. 31.....		177	Pekalongan Province.
Do.....	Jan. 1-14.....		81	
Do.....	Feb. 5-11.....		36	
Probalingga.....	Dec. 27.....			Province. Epidemic.
Tegal.....	Oct. 14-Dec. 31.....		26	
Do.....	Jan. 1-14.....		37	Pekalongan Province.
Do.....	Feb. 5-11.....		7	
Madagascar:				
Fort Dauphin (port).....	Nov. 1-Dec. 15.....	12	5	
Do.....	Feb. 1-15.....	1	1	Bubonic.
Itasy Province.....	Nov. 1-Dec. 15.....	4	2	
Do.....	Feb. 1-28.....	3	3	
Majunga (port).....	Nov. 1-30.....	1	1	
Moramanga Province.....				Nov. 1-Dec. 15, 1924: Cases, 49; Deaths, 34. Jan. 16-Feb. 28, 1925: Cases, 6; deaths, 6.
Tamatave (port).....	Nov. 1-30.....	1	1	
Tananarive Province.....				Oct. 16-Dec. 31, 1924: Cases, 298; deaths, 274.
Do.....				Jan. 1-Feb. 28: Cases, 357; deaths, 295.
Tananarive (town).....	Oct. 16-Nov. 30.....	8	7	
Do.....	Dec. 16-31.....	4	4	
Do.....	Jan. 1-Feb. 28.....	4	4	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received from December 27, 1924, to May 8, 1925—Continued

PLAGUE—Continued

Place	Date	Cases	Deaths	Remarks
Mauritius Island.....				Year 1924: Cases, 161; deaths, 144.
District—				
Flacq.....	Dec. 1-31.....	5	4	
Pamplemousses.....	do.....	1	1	
Plaines Wilhems.....	January-December, 1924.....	54	47	Not present March, April, May.
Port Louis.....	February-December, 1924.....	101	92	
Mexico:				
Tampico.....	Apr. 6, 1925.....			Plague rat found in vicinity of Government wharves.
Morocco:				
Marrakech.....				Feb. 9, 1925: Present in native quarter of town. Stated to be pneumonic in form and of high mortality.
Nigeria.....				August-November, 1924: Cases, 387; deaths, 317.
Palestine:				
Jerusalem.....	Mar. 3-9.....	1		
Peru:				
Callao.....	February, 1925.....	6	6	
Siam:				
Bangkok.....	Dec. 28-Jan. 3.....	1	1	
Do.....	Jan. 25-Mar. 7.....	3	2	
Siberia:				
Transbaikalia—				
Turga.....	October, 1924.....		3	On Chita Railroad.
Straits Settlements:				
Singapore.....	Nov. 9-15.....	1	1	
Do.....	Jan. 4-Mar. 14.....	18	5	
Do.....	Mar. 28-Apr. 4.....	4		One plague rat.
Syria:				
Beirut.....	Jan. 11-20.....	1		
Turkey:				
Constantinople.....	Jan. 9-15.....	5	5	
Union of South Africa:				
Do.....	Nov. 22-Jan. 3.....	28	15	In Cape Province, Orange Free State, and Transvaal.
Do.....	Jan. 4-Mar. 14.....	48	19	Do.
On vessels:				
S. S. Conde.....				At Marseille, France, Nov. 8, 1924. Plague rat found. Vessel left for Tamatave, Madagascar, Nov. 12, 1924.
Steamship.....	November, 1924.....	1	1	At Majunga, Madagascar, from Djibuti, Red Sea port.

SMALLPOX

Algeria.....				July 1-Dec. 31, 1924: Cases, 409.
Algiers.....	Jan. 1-Feb. 28.....	6		Jan. 1-20, 1925: Cases, 107.
Arabia:				
Aden.....	Jan. 25-Mar. 21.....	12	1	Imported.
Belgium.....	Jan. 1-Feb. 10.....	4		
Bolivia:				
La Paz.....	Nov. 1-Dec. 31.....	20	11	
Do.....	Jan. 1-Feb. 28.....	5	7	
Brazil:				
Pernambuco.....	Nov. 9-Jan. 3.....	100	27	
Do.....	Jan. 4-Feb. 28.....	95	42	
British East Africa:				
Kenya—				
Mombasa.....	Jan. 18-Feb. 28.....	66	14	
Uganda—				
Entebbe.....	Oct. 1-31.....	4		
Tanganyika Territory.....	Feb. 15-21.....	1		
British South Africa:				
Northern Rhodesia.....	Oct. 28-Dec. 15.....	57	2	
Do.....	Jan. 27-Feb. 2.....	3		Natives.
Southern Rhodesia.....	Jan. 20-Mar. 18.....	3	1	
Bulgaria:				
Sofia.....	Mar. 12-18.....	1		Varioloid.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received from December 27, 1924, to May 8, 1925—Continued

SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
Canada:				
Alberta—				
Calgary	Mar. 15-21	1		
British Columbia—				
Ocean Falls	Mar. 7-27	6		Very mild.
Vancouver	Dec. 14-Jan. 3	32		
Do.	Jan. 4-Apr. 12	305		
Victoria	Jan. 18-Apr. 18	10		
Manitoba—				
Winnipeg	Dec. 7-Jan. 3	14		
Do.	Jan. 4-Feb. 27	30		
Do.	Apr. 5-11	1		
New Brunswick—				
Bonaventure and Gaspé Counties	Jan. 1-31	1		
Northumberland	Feb. 8-14	1		County.
Ontario				Nov. 30-Dec. 27, 1924: Cases, 33.
Hamilton	Jan. 24-30	1		Dec. 28, 1924, to Mar. 28, 1925: Cases, 57; deaths, 1.
Ottawa	Mar. 29-Apr. 4	1		
Ceylon				July 27-Nov. 29, 1924: Cases, 27; deaths, 1.
Colombo	Jan. 18-Feb. 7	4		
Do.	Mar. 8-21	10		
China:				
Amoy	Nov. 9-Feb. 21			Present.
Do.	Feb. 22-Mar. 28		11	
Antung	Nov. 17-Dec. 28	5		
Do.	Jan. 5-Feb. 14	15	1	
Do.	Mar. 2-29	8		
Foochow	Nov. 2-Mar. 21			Present.
Hongkong	Nov. 9-Jan. 3	6	2	
Do.	Jan. 4-Feb. 7	9	7	
Do.	Feb. 15-Mar. 14	10	6	
Do.	Mar. 22-Apr. 4	9	4	
Manchuria—				
Dairen	Jan. 19-Feb. 1	2		
Harbin	Jan. 15-Feb. 11	5		
Nanking	Jan. 4-Mar. 28			Do.
Shanghai	Dec. 7-27	1	2	
Do.	Jan. 18-Mar. 7		8	
Chosen:				
Seoul	Dec. 1-31	1		
Colombia:				
Buenaventura	Feb. 15-28	2		
Santa Marta	Mar. 15-28			Present in mild form in localities in vicinity.
Cuba:				
Santiago	Apr. 12-18	3	1	
Czechoslovakia				April-June, 1924: Cases, 1; occurring in Province of Moravia.
Dominican Republic:				
Puerto Plata	Mar. 8-21	3		
Dutch Guiana:				
Paramaribo	Apr. 20	1		
Ecuador:				
Guayaquil	Nov. 16-Dec. 15	4		
Egypt:				
Alexandria	Nov. 12-Dec. 31	10		
Do.	Jan. 8-28	8		
Do.	Feb. 26-Mar. 4	1		
Estonia				Dec. 1-31, 1924: Cases, 2.
France				July-December, 1924: Cases, 81.
Do.	January, 1925	10		
Dunkirk	Mar. 2-8	1		From vessel. In quarantine.
St. Malo	Feb. 2-8	7	1	Believed to have been imported on steamship Ruyth from Sfax, Tunis.
Germany				June 29-Nov. 8, 1924: Cases, 7.
Frankfort-on-Main	Jan. 1-10	1		
Gibraltar	Dec. 8-14	1		
Gold Coast				July-December, 1924: Cases, 109; deaths, 1.
Great Britain:				
England and Wales	Nov. 23-Jan. 3	472		
Do.	Jan. 4-Mar. 21	1,477		
Newcastle-on-Tyne	Jan. 18-Feb. 21	9		
Do.	Mar. 1-7	1		

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received from December 27, 1924, to May 8, 1925—Continued

SMALLPOX—Continued.

Place	Date	Cases	Deaths	Remarks
Greece.....				January-June, 1924: Cases, 170; deaths, 27.
Do.....				July-December, 1924: Cases, 38; deaths, 26.
Saloniki.....	Nov. 11-Dec. 22.....	3		
Haiti:				
Cape Haitien.....	Mar. 22-Apr. 2.....	6		
India.....				Oct. 19, 1924, to Jan. 3, 1925: Cases, 12,564; deaths, 2,857.
Bombay.....	Nov. 2-Jan. 3.....	30	18	Jan. 4-Feb. 21, 1925: Cases, 22,834; deaths, 5,019
Do.....	Jan. 4-Mar. 14.....	389	190	
Calcutta.....	Oct. 26-Jan. 8.....	307	170	
Do.....	Jan. 4-Mar. 14.....	2,088	1,624	
Karachi.....	Nov. 16-Jan. 3.....	16	2	
Do.....	Jan. 4-Feb. 14.....	52	6	
Do.....	Feb. 22-Mar. 28.....	59	17	
Madras.....	Nov. 16-Jan. 3.....	122	48	
Do.....	Jan. 4-Mar. 7.....	552	212	
Do.....	Mar. 15-28.....	196	83	
Rangoon.....	Oct. 26-Jan. 3.....	86	28	
Do.....	Jan. 4-Feb. 7.....	287	49	
Do.....	Feb. 15-Mar. 14.....	488	125	
Indo-China.....				Aug. 1-Sept. 30, 1924: Cases, 223; deaths, 76. Dec. 1-31, 1925: Cases, 485; deaths, 114.
Province—				
Anam.....	Aug. 1-Sept. 30.....	49	11	
Do.....	Dec. 1-31.....	167	26	
Cambodia.....	Aug. 1-Sept. 30.....	40	9	
Do.....	Dec. 1-31.....	30	13	
Cochin-China.....				Aug. 1-Sept. 30, 1924: Cases, 115; deaths, 49. Dec. 1-31, 1924: Cases, 50; deaths, 13.
Saigon.....	Nov. 16-Jan. 3.....	17	5	Including 100 square kilometers of surrounding country.
Do.....	Jan. 4-Feb. 21.....	32	8	Do.
Do.....	Mar. 1-14.....	14	3	
Tonkin.....	Aug. 1-Sept. 30.....	19	7	
Do.....	Dec. 1-31.....	238	62	
Iraq.....	June 29-Jan. 10.....	138	67	
Do.....	Jan. 11-20.....	4	2	
Bagdad.....	Nov. 9-Dec. 27.....	2	1	
Do.....	Mar. 1-7.....	1		
Italy.....				June 29-Dec. 27, 1924: Cases, 63.
Jamaica.....				Nov. 30, 1924-Jan. 3, 1925: Cases, 50. Reported as alastrim.
Do.....				Jan. 4-31, 1925: Cases, 43. Reported as alastrim.
Kingston.....	Nov. 30-Dec. 27.....	4		Reported as alastrim.
Japan.....				Aug. 1-Nov. 15, 1924: Cases, 4.
Nagasaki.....	Feb. 9-Apr. 5.....	9	2	
Taiwan.....	Jan. 1-31.....	1		
Java:				
East Java—				
Paseroean.....	Oct. 26-Nov. 1.....	9	1	
Do.....	Nov. 12-19.....			
Soerabaya.....	Oct. 19-Dec. 31.....	685	212	Epidemic in 2 native villages.
Do.....	Jan. 15-Feb. 25.....	376	53	
West Java—				
Batam.....	Oct. 14-20.....	2		
Batavia.....	Oct. 21-Nov. 14.....	2		
Do.....	Dec. 20-Jan. 2.....	19	4	
Buitenzorg.....	Dec. 25-31.....	1		Batavia Residency.
Cheribon.....	Oct. 14-Nov. 24.....	15		
Do.....	Jan. 1-28.....	3		
Krawang.....	Jan. 15-21.....	1		
Pekalongan.....	Oct. 14-Nov. 24.....	22		
Do.....	Dec. 25-31.....	3		
Pemalang.....	Jan. 8-14.....	1		Province.
Preanger.....	Nov. 18-24.....	1		Pekalongan Residency.
Latvia.....				Oct. 1-Nov. 30, 1924: Cases, 5.
Lithuania.....				Jan. 1-31, 1925: Cases, 5.
Mexico:				Jan. 1-31, 1925: Cases, 2.
Durango.....	Dec. 1-31.....		5	
Do.....	Jan. 1-Mar. 31.....		16	
Guadalajara.....	Dec. 23-29.....		1	
Do.....	Jan. 6-Mar. 23.....		4	
Mexico City.....	Nov. 23-Dec. 27.....	5		
Do.....	Jan. 11-Apr. 11.....	45		
Monterey.....				Jan. 24, 1925: Outbreak. Mar. 14, 1925, present.
Salina Cruz.....	Dec. 1-31.....	1	1	
Do.....	Feb. 22-Mar. 31.....	7	1	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received from December 27, 1924, to May 8, 1925—Continued

SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
Mexico—Continued.				
Saltillo	Feb. 22-Apr. 11		2	
San Luis Potosi	Mar. 29-Apr. 11		2	
Tampico	Dec. 11-31	5	4	
Do	Jan. 1-Mar. 31	59	18	
Vera Cruz	Dec. 1-Jan. 3		10	
Do	Jan. 5-Apr. 5		38	
Villa Hermosa	Dec. 28-Jan. 10			Present. Locality, capital, State of Tabasco.
Yucatan State	Apr. 5-11			In country towns.
Nigeria				January-June, 1924: Cases, 357; deaths, 87.
Do				July-November, 1924: Cases, 87; deaths, 25.
Persia:				
Teheran	Sept. 23-Dec. 31		12	
Do	Jan. 1-31		10	
Peru:				
Arequipa	Nov. 24-30		1	
Do	Jan. 1-31		3	
Philippine Islands:				
Manila	Mar. 29-Apr. 4	3		
Poland				Sept. 21-Dec. 28, 1924: Cases, 30; deaths, 2. Jan. 4-Feb. 7, 1925: Cases, 13; deaths, 1.
Portugal:				
Lisbon	Dec. 7-Jan. 3	17		
Do	Jan. 4-Apr. 5	78	14	
Oporto	Nov. 30-Dec. 27	3	2	
Do	Jan. 11-Mar. 14	3		
Russia				January-June, 1924: Cases, 18,229; July-November, 1924: Cases, 3,665.
Senegal:				
Dakar	Mar. 16-22	4		
Siam:				
Bangkok	Dec. 28-Jan. 3	1	1	
Do	Jan. 18-Feb. 21		19	
Do	Mar. 1-14	10	3	
Sierra Leone:				
Freetown	Feb. 7-14	2		From S. S. Elmina.
Katymina	Mar. 9-15	1		
Spain:				
Barcelona	Nov. 27-Dec. 31		5	
Do	Mar. 19-25		1	
Cadiz	Nov. 1-Dec. 31		51	
Do	Jan. 1-Feb. 28		10	
Madrid	Year 1924		40	
Do	January-February		13	
Malaga	Nov. 23-Jan. 3		97	
Do	Jan. 4-Apr. 11		94	
Do	Nov. 30-Dec. 6		2	
Valencia	Feb. 15-Mar. 28		5	
Straits Settlements:				
Singapore	Feb. 22-Apr. 4	4	1	
Switzerland:				
Lucerne	Nov. 1-Dec. 31	19		
Do	Jan. 1-31	24		
Syria:				
Aleppo	Nov. 23-Dec. 27	13		
Do	Jan. 4-Feb. 28	71	18	
Beirut	Feb. 11-20	1		
Damascus	Jan. 6-13	2		
Do	Feb. 11-20	22		
Tripoli:				
Tripoli	July 14-Jan. 2	53		
Tunis:				
Tunis	Nov. 25-Dec. 29	42	35	
Do	Jan. 1-Apr. 15		307	
Turkey:				
Constantinople	Dec. 13-19	5		
Do	Mar. 16-22	2		

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received from December 27, 1925 to May 8, 1925—Continued

SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
Union of South Africa				Nov. 1-Dec. 31, 1924: Cases, 14. Jan. 1-31, 1925: Cases, 4—natives.
Cape Province	Feb. 1-7			Outbreaks.
De Aar District	Jan. 25-31			Outbreak at railway camp.
Do.	Nov. 9-Jan. 17			Outbreaks.
Natal	Mar. 1-7			Do.
Orange Free State	Nov. 2-8			Do.
Ladybrand District	Jan. 15-31			Outbreak on farm.
Transvaal	Nov. 9-Jan. 10			Do.
Do.	Feb. 1-7			Outbreaks.
Uruguay				January-June, 1924: Cases, 101; deaths, 2.
Do.				July-November, 1924: Cases, 53; deaths, 5.
Yugoslavia:				
Belgrade	Mar. 1-Apr. 7	6		
On vessel:				
S. S. Eldridge	Mar. 23	1		At Port Townsend, from Yokohama and ports.
S. S. Habana	Feb. 18	1		At Santiago de Cuba, from Kingston, Jamaica.
S. S. Ruyth				At St. Malo, France, January, 1924, from Sfax Tunis; believed to have imported small-pox infection.

TYPHUS FEVER

Algeria				July 1-Dec. 20, 1924: Cases, 101; deaths, 14.
Algiers	Nov. 1-Dec. 31	5	1	
Do.	Jan. 1-Mar. 20	11	4	
Argentina:				
Rosario	Jan. 1-31		1	
Bolivia:				
La Paz	Nov. 1-Dec. 31	3		
Do.	Jan. 1-31	2		
Bulgaria				January-June, 1924: Cases, 191; deaths, 28.
Do.				July-October, 1924: Cases, 5.
Chile:				
Concepcion	Nov. 25-Dec. 1		1	
Do.	Jan. 6-12		2	
Do.	Jan. 27-Feb. 2		1	
Iquique	Nov. 25-Dec. 1		2	
Do.	Feb. 1-Mar. 28		2	
Talcahuano	Nov. 16-Dec. 20		5	
Do.	Jan. 4-10		1	
Valparaiso	Nov. 25-Dec. 7		4	
Do.	Jan. 11-Mar. 28		17	
China:				
Antung	Mar. 16-22	1		
Chosen:				
Chemulpo	Feb. 1-28	1		
Seoul	Nov. 1-30	1	1	
Do.	Feb. 1-28	2	1	
Czechoslovakia				December, 1924: Cases, 5.
Do.	Jan. 1-31	14		
Egypt:				
Alexandria	Dec. 3-9	1	1	
Do.	Mar. 12-18	1		
Cairo	Oct. 1-Dec. 23	13	8	
Esthonia				Dec. 1-31, 1924: Cases, 5.
Do.	Jan. 1-31	4		
France				July-October, 1924: Cases, 7.
Gold Coast				Oct. 1-31, 1924: 1 case.
Greece				May-June, 1924: Cases, 116; deaths, 8.
Do.				July-December, 1924: Cases, 40; deaths, 4.
Athens	Feb. 1-Mar. 10		3	
Saloniki	Nov. 17-Dec. 15	3	2	
Do.	Jan. 25-31	1		

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from December 27, 1925 to May 8, 1925—Continued

TYPHUS FEVER—Continued

Place	Date	Cases	Deaths	Remarks
Japan.....				Aug. 1-Nov. 15, 1924: Cases, 2.
Latvia.....				October-December, 1924: Cases, 30.
Lithuania.....				August-October, 1924: Cases, 15; deaths, 1.
Do.....				Jan. 1-31, 1925: Cases, 27; deaths, 2.
Mexico:				
Durango.....	Dec. 1-31.....		1	
Do.....	Mar. 15-31.....	1	1	
Guadalajara.....	Dec. 23-29.....		1	
Mexico City.....	Nov. 9-Jan. 3.....	80		Including municipalities in Federal District.
Do.....	Jan. 11-Apr. 11.....	84		
San Luis Potosi.....	Mar. 8-14.....		1	
Morocco.....				November, 1924: Cases, 5.
Palestine.....				Nov. 12-Dec. 29, 1924: Cases, 10.
Ekrón.....	Dec. 23-29.....	1		
Jerusalem.....	do.....	2		
Do.....	Jan. 20-26.....	1		
Mikveh Israel.....	do.....	1		
Petach-Tikvah.....	Mar. 24-30.....	1		
Ramleh.....	Feb. 10-Mar. 23.....	2		
Tiberias.....	Feb. 24-Mar. 2.....	2		
Peru:				
Arequipa.....	Nov. 24-Dec. 31.....		3	
Poland.....				Sept. 28, 1924-Jan. 3, 1925: Cases, 751; deaths, 57. Jan. 4-Feb. 7, 1925: Cases, 581; deaths, 49.
Portugal:				
Lisbon.....	Dec. 29-Jan. 4.....		2	
Oporto.....	Jan. 4-Feb. 7.....	2		
Rumania.....				January-June, 1924: Cases, 2,906; deaths, 328.
Do.....				July-December, 1924: Cases, 288; deaths, 38.
Constanza.....	Dec. 1-20.....	1		
Do.....	Feb. 1-23.....	2		
Russia.....				Jan. 1-June 30, 1924: Cases, 95,682. July-November, 1924: Cases, 34,729.
Leningrad.....	June 29-Nov. 22.....	12		
Spain:				
Madrid.....	Year 1924.....		3	
Malaga.....	Dec. 21-27.....		1	
Sweden:				
Goteborg.....	Jan. 18-Feb. 28.....	2		
Tunis.....				July 1-Dec. 20, 1924: Cases, 40.
Tunis.....	Mar. 5-25.....	9	1	
Do.....	Apr. 2-15.....	18	3	
Turkey:				
Constantinople.....	Nov. 15-Dec. 19.....	6	1	
Do.....	Jan. 2-Mar. 7.....	9	1	
Union of South Africa.....				Nov. 1-Dec. 31, 1924: Cases, 345; deaths, 87. Jan. 1-Feb. 23, 1925: Cases, 159; deaths, 17; native. In white population, cases, 12.
Cape Province.....	Nov. 1-Dec. 31.....	126	24	
Do.....	Jan. 1-Feb. 28.....	74	9	
East London.....	Nov. 16-22.....	1		
Do.....	Jan. 18-24.....	1		
Port Elizabeth.....	Feb. 22-28.....	1		
Natal.....	Nov. 1-Dec. 31.....	130	50	
Do.....	Jan. 1-Feb. 28.....	43	5	
Do.....	Mar. 1-7.....			Outbreaks.
Durban.....	Feb. 15-21.....	1		
Orange Free State.....	Nov. 1-Dec. 31.....	59	8	
Do.....	Jan. 1-Feb. 28.....	32	3	Native.
Transvaal.....	Nov. 1-Dec. 31.....	30	5	
Do.....	Jan. 1-Feb. 28.....	10		Do.
Yugoslavia.....				Aug. 3-Oct. 18, 1924: Cases, 17; deaths, 2. Mar. 8-14, 1925: Cases, 1.
Belgrade.....	Nov. 24-Dec. 28.....	5		

YELLOW FEVER

Gold Coast.....	October-November, 1924.	4	4	
Salvador:				
San Salvador.....	June-October, 1924.	77	28	Last case, Oct. 22, 1924.